



Patient Handbook

INSIDE:

Hospital Information

Infection & Fall Prevention

Education

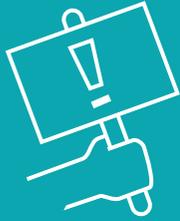
Personal Health Record
& Discharge

Parkview Resources



400 West 16th Street
Pueblo, CO 81003
719.584.4000
Parkviewmc.com

Speak Up™ For Your Rights



As a patient, you have the right to ...

- Be informed about your care.
- Make decisions about your care.
- Refuse care.
- Know the names of your caregivers.
- Be treated with courtesy and respect.
- Be listened to by your caregivers.
- Have an interpreter.
- Receive information in a way that meets your needs, such as if you have impaired vision.
- Religious or spiritual services.
- Copies of your test results and medical records.
- Have a patient advocate with you during your care.
- Privacy of your health information.
- Ask that pictures or videos taken of you be used only to identify you or assist in your care.
- Care that is free from discrimination.



Be active in your care ...

- Ask questions.
- Pay attention to instructions from your caregivers.
- Inform caregivers about your medicines, supplements and allergies.
- Share your wishes about life-saving actions, such as being put on a ventilator.



Your advocate can help ...

- Get information and ask questions when you cannot.
- Ask for help if you are not getting the care you need.
- Make care decisions when you cannot (so long as he or she is a legal guardian, a health care power of attorney, or has some other legal permission).



If you think something is wrong ...

- Ask to speak to a patient representative.
- Work with the facility or health system to address the issue.
- File a complaint with the state agency that licenses or certifies the facility.
- Report a patient safety event to The Joint Commission.

The goal of Speak Up™ is to help patients and their advocates become active in their care.

Speak Up™ materials are intended for the public and have been put into a simplified (i.e., easy-to-read) format to reach a wider audience. They are not meant to be comprehensive statements of standards interpretation or other accreditation requirements, nor are they intended to represent evidence-based clinical practices or clinical practice guidelines. Thus, care should be exercised in using the content of Speak Up™ materials. Speak Up™ materials are available to all health care organizations; their use does not indicate that an organization is accredited by The Joint Commission.

Parkview's Patient Representative can be contacted by calling 719.584.4496 Monday-Friday, 8:00 a.m.-4:30 p.m. At other times, an Administrative Supervisor is available to assist you by dialing "0" on any hospital phone and the operator will connect you.

A Message from Our President



Parkview has proudly provided medical services to the people of Southern Colorado since the mid 1920s. Parkview operates as a nonprofit, community-owned, and locally governed medical center, and we are committed to providing quality health care to each of our patients. Whether you are coming to Parkview as a patient or visitor, your satisfaction with our service is very important.

During your visit to our medical center, you will find Parkview to be a clean, well-maintained, state-of-the-art regional medical center with skilled nurses, competent technicians, and an excellent medical staff. This entire team of professionals is here to serve your medical needs.

Parkview Medical Center remains committed to a culture of continuous quality improvement, and our goal is to exceed your expectations in the delivery of our services. We welcome your comments and suggestions while you are in our facility, as this provides us an opportunity to improve. You might also receive a survey sometime after your discharge, and your feedback is important to our improvement efforts.

I am honored to be the president and CEO of this organization, and on behalf of the physicians, nurses, and everyone here at Parkview Medical Center, I would like to thank you for choosing Parkview as your health care provider.

A handwritten signature in cursive script that reads "Leslie Barnes".

Leslie Barnes

President/Chief Executive Officer

MISSION:

To provide the highest quality health care to the people we serve.

VISION:

To be the health care provider of choice for patients, physicians and employees.

VALUES:

- Honesty & Integrity
- Accountability
- Respect
- Teamwork
- Stewardship

Viruses or Bacteria

What's got you sick?

Antibiotics are often prescribed when they are not needed for respiratory infections. Antibiotics are only needed for treating certain respiratory infections caused by bacteria. Viral illnesses cannot be treated with antibiotics. When an antibiotic is not prescribed, ask your healthcare professional for tips on how to relieve symptoms and feel better.

Common Respiratory Infections	Common Cause			Are Antibiotics Needed?
	Virus	Virus or Bacteria	Bacteria	
Common cold/runny nose	✓			No
Sore throat (except strep)	✓			No
COVID-19	✓			No
Flu	✓			No
Bronchitis/chest cold (in otherwise healthy children and adults)*		✓		No*
Middle ear infection		✓		Maybe
Sinus infection		✓		Maybe
Strep throat			✓	Yes
Whooping cough			✓	Yes

* Studies show that in otherwise healthy children and adults, antibiotics for bronchitis won't help you feel better.



To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.



About Your Guide

This guide was created to help you and your family take an active role in your hospital stay. Our team, including physicians, will assist you in the use of this guide. The primary reason for this guide is to help us make sure that all your questions and needs are being addressed while you are in the hospital.

Hospital Information

Parkview History/Your Stay.....	3
Discrimination/Language Services.....	4-5
Service Animal Guidelines.....	6-7
Notice of Privacy Practices.....	8-12
Patient Rights.....	13-16
New Gender Identity/Do Ask, Do Tell.....	17-18
Patient Responsibilities.....	19
Proposition 106/Accommodations.....	20-23
Visitation.....	23-25
Safety & Security/Health Care Team.....	26-27
Finances.....	28-30
Resolving a Problem.....	30-31
Managing Your Pain/Responsibility for Care.....	32-33
Physician Communication.....	34-25

Infection & Fall Prevention

Fall Prevention.....	36-37
Hand Washing/Isolation Precautions.....	38
COVID-19.....	39-40
FAQ - Infections.....	41-48
Urinary Catheter.....	49
Sepsis.....	50

Education

Stroke Risk Factors & Prevention.....	51-52
Educational Opportunities.....	53
Medication Side Effects.....	54-55
Penicillin Allergy.....	56
Pressure Injury.....	57
Early Heart Attack.....	58
Heart Attack Failure.....	59-60
Hands-Only CPR.....	61
Tobacco Cessation.....	62-64

Personal Health Record & Discharge

Receiving Blood/Blood Products.....	65
Follow-up Survery.....	66
Parkview Connect App.....	67
Case Management/Discharge Planning.....	68-69
Pain Aftercare Instructions.....	69
Pain Control Options.....	70-73
Advance Care Planning/Organ Donor Information.....	74

Parkview Resources

Television Channel Line Up.....	75-76
.....	77

PARKVIEW HISTORY



Parkview Medical Center is a private, nonprofit organization operated under a license from the State of Colorado. Parkview was founded in 1923 and currently operates 350 acute-care beds.

Parkview is governed by a Board of Directors. The Board of Directors is comprised of Pueblo community leaders, who volunteer their time, knowledge and expertise to help guide the Parkview Health System on goals, policies and general direction that best serves Pueblo and

southern Colorado. They serve on the board for three-year terms.

At Parkview, we bring together medical education, research and patient care in an environment that cultivates the next generation and best minds and hearts of medicine. Our strong medical teaching program includes affiliations with several educational institutions and professional training programs, including Colorado State University-Pueblo and Pueblo Community College and we have students from across the allied health professions. We also have several graduate medical education programs based here at Parkview including both resident and fellowship training. It takes many years of school and training to become an attending physician, a physician who has completed all their training. A resident is a doctor who has graduated medical school and is getting further specialized training before undergoing specialty board certification and a fellow is a doctor who has completed at least three years of residency and is getting further sub-specialty training. Medical students, residents or fellows will always have an attending who is working with the trainees which is why you may see a team of medical professionals throughout your stay at Parkview. Through learning and research, we enhance patient care.

Parkview is accredited and certified by The Joint Commission and the Federal Department of Health and Human Services as a Medicare provider. Parkview is a member of the American Hospital Association, Colorado Hospital Association, Greater Pueblo Chamber of Commerce and the Latino Chamber of Commerce.

YOUR STAY

All patients have equal access to medical treatment at Parkview. We will provide care in a manner that is sensitive to cultural, social, religious and other preferences. In providing you this care, we will not discriminate on the basis of age, race, color, ethnicity, religion, culture, language, physical or mental disability, sex, sexual orientation, gender identity, gender expression, national origin, disability, political affiliation, or ability to pay.

Upon admission, patients (or a guardian in those cases where one is required) will be asked to sign a general permission for treatment, which will allow Parkview staff to provide IVs, transfusions, and diagnostic procedures, as well as other general, non-invasive procedures.

Any non-emergency procedure ordered by the physician will be explained completely as to purpose, risk, benefits, alternatives, safety and patient confidentiality. You also will be given the name of the person performing the procedure. For procedures requiring signed informed consents, the signed form must be on file before the procedure can begin.

DISCRIMINATION IS AGAINST THE LAW

Parkview Medical Center complies with applicable federal civil rights laws and does not discriminate, treat people differently or exclude on the basis of age, race, color, ethnicity, religion, culture, language, physical or mental disability, sex, sexual orientation, gender identity, gender expression, national origin, disability, political affiliation, or ability to pay.

Parkview Medical Center provides free:

- Interpretive services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters for hearing impaired
 - Documents read aloud by a professional for visually impaired
- Language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Translation services through electronic format

If you need these services, please inform a hospital staff member. Services available 24 hours a day, 7 days a week. You may also contact the Patient Representative, performing the function of Civil Rights Coordinator, at 719.584.4496.

If you believe that Parkview Medical Center has failed to provide these services or discriminated in on the basis of age, race, color, ethnicity, religion, culture, language, physical or mental disability, sex, sexual orientation, gender identity, gender expression, national origin, disability, political affiliation, or ability to pay, you can file a grievance with the Patient Representative by phone, fax, mail, email or in person.

p: 719.584.4496 / f: 719.595.7571 / TTY: 800.659.2656 / email: pamm@parkviewmc.com or mail:
Patient Representative, Parkview Medical Center, 400 West 16th St., Pueblo, CO 81003

If you need help filing a grievance, the Patient Representative is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services, 200 Independence Ave., SW Room 509 HHH Building,
Washington, D.C. 20201, 1.800.368.1019, 800.537.7697 (TDD) Complaint forms are available on the website:
<http://www.hhs.gov/ocr/office/file/index.html>.

Parkview provides language access services.

Ask your patient to indicate which language they speak. The text reads, "Attention: If you speak 'Language,' language assistance & services are available to you free of charge."

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

Amharic: ማሳሰቢያ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ

Arabic: برقم ات صل ب الامجان لك ت توافر ال لغوية الامساعدة خدمات ف إن ال لغة، اذكر ت تحدث ك نت إذا ملحوظة

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.)

French: ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement

Nepali: ध्यान दनु होसः तपाइ ले नेपाल बोलनहन्छ भन तपाइ को निम्त भाषा सहायता सवाहरु नःशल्क रूपमा उपलब्ध छ । फोन गनु होसर्

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

Japanese: 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。

Cushite (Oroomiffa/Oromo): XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama.

Persian (Farsi): رایگان به صورت زبانی ت سه یلات ک نید، می گ ف تگوف ارسسی زب ان به اگ ری گان ابر ای شما

KRU (Bassa): Dè dẹ nià kẹ dyédé gbo: ɔ jũ ké m̩ [Bàsó ò -wùdù-po-nyò] jũ ní, nií, à wuḍu kà kò dọ po-poò bé in m̩ gbo kpáa.

Ibo: Ntị: Ọ bụrụ na asụ Ibo, asụsụ aka ọasụ n'efu, defu, aka.

Yoruba: AKIYESI: Bi o ba nsọ èdè Yorùbú ọfẹ ni iranlọwọ lori èdè wa fun yin o.

SERVICE DOG GUIDELINES FOR PATIENTS

Service dogs can escort an individual with a disability in all areas of Parkview Medical Center where visitors and patients are normally allowed, unless the dog's presence or behavior creates a major change in the quality of care or service being provided or is a direct threat to other persons. For more detailed information, contact Patient Relations at 719.584.4496 (pamm@parkviewmc.com) or the Nursing Supervisor at 719.584.4450.

What Is a Service Dog?

Any guide dog, signal dog, or other animal individually trained to do work or perform tasks for the benefit of an individual with a disability, including but not limited to:

- guiding individuals with vision impairments;
- alerting individuals with hearing impairments to sounds;
- assisting individuals with mobility impairments with balance
- assisting individuals with psychiatric disorders with medication reminders, prevention of self-harm, control of light increased orientation

The service animal may be trained by an organization or its handler, and does not require certification or a license. They may not always wear harnesses, collars or any official designation that they are service animals. Service animals are not pets, but rather working animals that help ensure the safety of people with disabilities.

May I bring my service dog to the hospital?

Parkview welcomes your service dog during your visits to our facilities. If the service dog poses a health risk, is not house broken, or the service dog is out of control and you do not take effective action to control it, the service dog may be removed.

Who is responsible for the care of my service dog during my hospital visit?

Parkview is not responsible for the care or supervision of your service dog. You or your family/friend are responsible for caring for and supervising the service dog, which includes toileting, feeding, grooming, and veterinary care.

What if I am unable to care for my service dog during my visit?

We ask that you arrange to have a family member or friend care for your service dog. If that is not possible or in the event of an emergency, the hospital will find a dog sitter or if needed, we will arrange to board your dog. The cost for dog sitting or to board a dog is the responsibility of the patient.

Is there a location where the dog is not allowed?

Yes. Service dogs are not permitted in areas restricted to the general public (procedure rooms, operating rooms, maternity ward, and isolation rooms) or in any area where the service dog's presence may compromise a sterile environment. Service dogs can remain with you in all other areas, as long as you are in direct control of your service dog.

Leash, Harness or Other Tether

Service dogs must be harnessed, leashed, or tethered, unless these devices interfere with the service dog's work/tasks or if the handler's disability prohibits their use. The handler/owner must maintain control of the dog through voice, signal, or other effective controls.



Before Bringing Your Partner (Service Dog) with you to the hospital, especially for a lengthy stay or during an emergency, ask yourself the following questions:

- 1. Are you well enough or stable enough to take care of your service dog?**
- 2. If you're not, can you make arrangements for someone else (a family member or friend (never staff) to care for your service dog?**
- 3. Will your service dog be safe?** Consider whether you'll be aware enough to properly look out for your service dog's interests, and whether or not she will be exposed to germs, chemicals or highly charged situations over which you can't help her cope, and whether or not she has the skills and training necessary to keep herself calm, quiet, settled and out of the way at all times.
- 4. Will you be safe?** Consider whether your partner is familiar enough with medical procedures and equipment to not be in the way, not prevent doctors and nurses from doing their job, and not create problems that otherwise wouldn't be there, like knocking over IV poles, tearing out lines or leads and unplugging machines.
- 5. Will those around you, including nurses, other patients, doctors and visitors who don't know you, be safe? Is there a possibility your Service Dog's presence might be dangerous to anyone for any reason?**
- 6. How does your partner respond to high levels of stress and uncertainty?** Even the well-trained Service Dog can react poorly during highly charged events, especially if they're not familiar with the circumstances. Keep in mind yourself, your partner and those who must provide care to you. If you're unconscious, non-responsive/heart or breathing has stopped and your partner displays any protective behavior, typically, your partner will be removed from the situation and collected by Animal Control as quickly as possible so medical staff can tend to you.
- 7. How is your partner's training?** If your Service Dog isn't capable of laying quietly on a blanket, mat, or bed for hours on end with little interaction, stimulation and under high levels of distraction, whether you're present or not (consider that you may be taken out of your room to radiology, the lab or for other testing and your partner must remain behind for her safety), and without interfering with doctors, nurses and visitors in any way, she may not be ready for a hospital trip.
- 8. If your partner isn't settling in as well as you would have hoped, can you make alternate arrangements for her? Would a friend or family member be able to come pick her up and care for her until you were able to do so?**
- 9. Do you have a plan in place in case you're transferred to a unit where your Service Dog wouldn't be able to accompany you?**
- 10. Does your partner possess the training and skills required to navigate the unique environment the hospital presents? Is your partner able to successfully move with you and work with you while you're hooked up or surrounded by unfamiliar equipment, smells, noises and sights? Is your partner able to be a calming, healthy presence during your stay?**

NOTICE OF PRIVACY PRACTICES

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review this notice carefully.

Your health information is personal, and we are committed to preserving the confidentiality of your health information created or maintained at our medical center. Your health information is also very important to our ability to provide you with quality care, and to comply with certain laws. This notice applies to all records about your care that occurs at our facility, whether the records are created by Parkview Medical Center personnel or by your physician.

Your physician and/or health plan may have different policies and a different notice regarding your health information that is created in the physician's office and/or at the offices of the health plan.

We Are Legally Required to Safeguard Your Protected Health Information

We are required by the Health Insurance Portability and Accountability Act (HIPAA), a federal law, as well as state laws to: maintain the privacy of your confidential health insurance, also known as "protected health information" or "PHI"; and provide you with this notice of our duties and privacy practices regarding your health information.

Future Changes to Our Practices and This Notice

We reserve the right to revise this notice and make the revision apply to your health information that we created or received prior to the effective date of this revision. You may obtain a copy of any revised notice by contacting Parkview's Privacy Officer at 719.584.4240. We will also make any revised notice available in our Admissions Department.

Parkview may have business associates that perform activities on behalf of the medical center involving the use or disclosure of PHI. These business associates are obligated to limit their use and disclosure of PHI to that which is permitted under HIPAA.

How We May Use and Disclose Your Protected Health Information

The law requires us to have your authorization for some uses and disclosures. In other circumstances, the law allows us to use or disclose protected health information (PHI) without your authorization. The medical center is permitted to use your PHI without your authorization in the following circumstances:

Treatment. Without your authorization, we may use or disclose your PHI to help us provide treatment to you. For example, we may disclose your PHI to physicians, nurses, and other health care personnel who are involved in your care. Treatment activities may include, among others, recording in your medical record the results of examinations or tests, observations, videos taken of you during the course of your treatment or photographs taken of you or your condition or wound. This information may be shared with specialist caregivers, other hospitals, or diagnostic laboratories to assist them as they provide care to you.

Payment. Without your authorization, we may also use or disclose your PHI to your insurance carrier in order to secure payment for treatment provided to you. For example, we may use your PHI to create the bills that we submit to the insurance company, or we may disclose certain portions of your PHI to our business associates who perform billing, claims processing or collection services for us.

Health Care Operations. Without your authorization, we may also use or disclose your PHI in order to operate this facility. For example, we may use your PHI to evaluate the quality of care you received from us, or to evaluate the performance of those involved with your care.

Organized Health Care Arrangement Participants. To provide the joint delivery of health care services to patients, without your authorization, we may also use or disclose your PHI to our provider affiliates that participate in an Organized Health Care Arrangement (OHCA), as defined by HIPAA. As an OHCA, the participating providers may share your PHI with each other, as necessary to carry out treatment, payment or health care operations related to the OHCA. Parkview Medical Center, Mt. San Rafael Hospital, Prowers Medical Center, Southeast Colorado Hospital District, and Spanish Peaks Regional Health Center have agreed to form and to enter into an organized health care arrangement known as “BridgeCare Health Network.” Without your prior written authorization, the members of BridgeCare Health Network may share your PHI with each other for the purposes of treatment, payment, and health care operations in order to better address the community’s health care needs. This OHCA includes the following members and their additional service delivery sites*:

Parkview Medical Center, Inc., 400 West 16th St., Pueblo, CO 81003

Spanish Peaks Regional Health Center, 23500 U.S. Hwy 160, Walsenburg, CO 81089

Prowers Medical Center, 401 Kendall Dr., Lamar, CO 81052

Mt. San Rafael Hospital, 410 Benedicta Ave., Trinidad, CO 81082

Southeast Colorado Hospital District, 373 East Tenth Ave., Springfield, CO 81073

**Additional service delivery sites associated with OHCA participation may be added from time to time, additional service delivery sites associated with each OHCA participant may also apply.*

Appointment Reminders. We may also use and disclose your PHI to contact you as a reminder that you have an appointment for treatment at our facility, to tell you about or recommend possible treatment options, or about health-related benefits or services that may interest you. We may communicate in electronic form, to include but not limited to, text messaging and email. For instance, we may email you these appointment reminders. As part of our appointment reminders, we may email information regarding your procedure to you. The email may contain a link to an informational video that describes your procedure and the pre-procedure and post-procedure instructions. However, because the emailed link is not encrypted, there may be some risk that information about you and the procedure that you will receive is not secure. You have the option of not having this information emailed to you.

Business Associates. We will use and disclose your health information to certain business associates that assist us with the performance of administrative and other tasks in operating our facility, for example, the Colorado Health and Hospital Association or The Joint Commission for hospital accreditation. We may provide your PHI to our accountants and other consultants to make sure we are complying with the laws that affect us.

Fundraising. We may also provide your contact information (such as name, address and phone number) and the dates you received services from us, to the Parkview Foundation, which helps us with our fundraising efforts. If you are contacted in our fundraising effort, you will have the opportunity to opt out of receiving future fundraising communications from us.

Certain Uses and Disclosures Do Not Require Your Authorization

Though you may request us to restrict disclosure of the following, the law requires or permits us to disclose PHI without your authorization in the following circumstances:

When Required by Law. We will disclose PHI when we are required to do so by federal or state law.

For Public Health Activities. For example, we disclose PHI when we report suspected child abuse, the occurrence of certain communicable diseases, or adverse reactions to a drug or medical device.

For Reports About Victims of Abuse, Neglect or Domestic Violence. We will disclose your PHI in these reports only if we are required or authorized by law to do so, or if you otherwise agree.

To Health Oversight Agencies. We will provide PHI, as requested, to government agencies that have authority to audit or investigate our operations.

For Lawsuits and Disputes. If you are involved in a lawsuit or dispute, we may disclose your PHI in response to a subpoena or other lawful request. Parkview Medical Center will require assurance that reasonable efforts have been made to notify you about the subpoena and that you have had an opportunity to object to the request.

To Law Enforcement. We may release PHI if asked to do so by a law enforcement official, in the following circumstances: (a) in response to a court order, subpoena, warrant, summons or similar process; (b) to identify or locate a suspect, fugitive, material witness or missing person; (c) about the victim of a crime if, under certain limited circumstances, we are unable to obtain the person's agreement; (d) about a death we believe may be due to criminal conduct; (e) about criminal conduct at our facility; and (f) in emergency situations, to report a crime, its location or victims, or the identity, description or location of the person who committed the crime.

For Deceased Individuals. We may disclose PHI to coroners, medical examiners and funeral directors to facilitate their duties.

To Organ Procurement Organizations. We may disclose PHI to facilitate organ donation and transplantation if you have otherwise actually consented to the organ transplantation or donation.

For Medical Research. We may disclose your PHI without your authorization to medical researchers who request it for approved medical research projects; however, with very limited exceptions, such disclosures must be cleared through a special approval process before any PHI is disclosed to the researchers, who will be required to safeguard the PHI they receive. In most cases, the information we share with researchers will be de-identified to protect patient confidentiality as practicable.

For Specialized Government Functions. For example, we may disclose your PHI to authorized federal officials for intelligence and national security activities that are authorized by law, or so that they may provide protective services to the President of the United States, or foreign heads of state or conduct special investigations authorized by law.

To Avert a Serious Threat to Health or Safety. We may disclose your PHI to someone who can help prevent a serious threat to your health and safety or the health and safety of another person or the public.

Inmates and Persons in Custody. If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may use or disclose your health information to the correctional institution or to law enforcement personnel as may be necessary.

To Workers' Compensation or Similar Programs. We may provide your PHI to these programs in order for you to obtain benefits for work-related injuries or illness.

Disaster Relief. We may also disclose your PHI to persons performing disaster relief notification activities.

Uses and Disclosures Requiring Only Your Oral Agreement

Under certain circumstances, we may use or disclose your health information, if we inform you in advance, and you have had the opportunity to agree or object. Such circumstances include:

People involved in your care. We may disclose your health information to people who are involved in your care or help pay for your care, such as family members, close personal friends, or any other person identified by you.

Sometimes, we may reasonably infer from the circumstances that you agree to the use or disclosure of your PHI to the people involved in your care. For instance, if you bring your spouse into an examination room or allow them to remain in your patient room when treatment is being discussed, we will reasonably infer that you agree to the disclosure of your health information to your spouse.

Uses and Disclosures That Require Us to Give You the Opportunity to Object

Patient Directory. If you do not object, we may include your name, location in our facility and general condition in the patient directory that we use when responding to requests by those who ask for you by name. If you do not object, we also disclose information from the directory and your religious affiliation to clergy who visit the facility.

If you do not object, we may include your PHI to a Health Information Exchange (HIE). HIE provides the capability to electronically move clinical information among health care information systems while maintaining the meaning of the information being exchanged. The goal of HIE is to facilitate access to and retrieval of clinical data to provide safer, more timely, efficient, effective, equitable, patient-centered care. HIE is also useful to public health authorities to assist in analyses of the health of the population.

Unless you object, we may provide relevant portions of your PHI to a family member, friend or other person you indicate is involved in your health care or in helping you get payment for your health care.

In an emergency or when you are not capable of agreeing or objecting to these disclosures, we will disclose PHI as we determine is in your best interest, but will tell you about it later, after the emergency, and give you the opportunity to object to future disclosures to family and friends.

Other Uses and Disclosures of Your Protected Health Information

Other uses and disclosures of your PHI that are not covered by this notice or the laws that apply to us will be made only with your written authorization. An authorization is for a specified duration of time, typically one year, and will expire after that time. If you give us written authorization for a use or disclosure of your PHI, you may revoke that authorization, in writing, at any time. If you revoke your authorization we will no longer use or disclose your PHI for the purposes specified in the written authorization, except that we are unable to take back any disclosures we have already made with your permission.

Your Rights Related to Your Protected Health Information

You have the following rights:

The Right to Request Limits on Uses and Disclosures of Your PHI. You have the right to ask us to limit how we use and disclose your PHI, as long as you are not asking us to limit uses and disclosures that we are required or authorized to make to the Secretary of the U.S. Department of Health & Human Services or any of the disclosures permitted under HIPAA. Any such request must be submitted in writing to our privacy officer. We are not required to agree to your request. If we do agree, we will respond in writing and will abide by the agreement except when you require emergency treatment.

The Right to Choose How We Communicate With You. You have the right to ask that we send information to you at a specific address (for example, at work, rather than at home). We shall agree to your request as long as it would not be disruptive to our operations to do so. You must make any such request at the time of admission or later in writing, addressed to our privacy officer.

The Right to See and Copy Your PHI. Except for some limited circumstances, you may look at and copy your PHI if you ask in writing to do so. Any such request must be addressed to our Health Information Services Department, which will respond to your request within 30 days (or 60 days if the extra time is needed in the judgment of the Health Information Services Department). In certain situations we may deny your request, but if

we do, we will explain in writing the reasons for the denial and advise you of your right to have the denial reviewed. If you ask us to copy your PHI, we will charge you in accordance with Colorado Department of Public Health and Environment rules and regulations.

The Right to Correct or Amend Your PHI. If you believe that the PHI we have about you is incomplete or incorrect, you may ask us to amend it. Any such request must be made in writing and must be addressed to our Health Information Services Department, and must tell us why you think the amendment is appropriate. We will not process your request if it is not in writing or does not tell us why you think the amendment is appropriate. We will act on your request within 60 days (or 90 days if the extra time is needed in the judgment of the Health Information Services Department), and will inform you in writing as to whether the amendment will be made or denied. If we agree to make the amendment, we will ask you to advise us of whom else you would like us to notify of the amendment.

We may deny your request for amendment if you ask us to amend information that:

- was not created by us;
- is not part of the PHI we keep about you;
- is not part of the PHI that you would be allowed to see or copy; or
- is determined by us to be accurate and complete.

If we deny the requested amendment, we will tell you in writing how to submit a statement of disagreement or to request inclusion of your original amendment request in your medical record.

The Right to Get a List of the Disclosures We Have Made. You have the right to get a list of disclosures of your PHI made by Parkview Medical Center during the last six years commencing April 14, 2003. The list will not include disclosures we have made directly to you or your family or friends or through our facility directory, or for disaster notification purposes. Neither will the list include disclosures made before the HIPAA Privacy Rule Compliance date of April 14, 2003.

Your request for a list of disclosures must be made in writing and be addressed to our Health Information Services Department. We will respond to your request within 60 days (or 90 days if the extra time is needed in the judgment of the Health Information Services Department). The list we provide will include disclosures made within the last six years unless you specify a shorter period. The first list you request within a 12-month period will be free. You will be charged our costs for providing any additional lists within the 12-month period.

The Right to Get a Paper Copy of This Notice. You will be given a copy of this notice upon your first admission to Parkview Medical Center after January 1, 2015. Following that initial admission, you may obtain a paper copy of this notice in our Admissions Department. You may also obtain a copy by contacting the Privacy Help Line at 719.584.4240.

Complaints. If you believe your privacy rights have been violated, you may file a complaint with Parkview Medical Center or with the Secretary of the Department of Health and Human Services. To file a complaint with Parkview Medical Center, please put your complaint in writing and address it to our Compliance & Privacy Officer at 400 W. 16th St., Pueblo, CO 81003 or by phoning the Privacy Help Line at 719.584.4240. We will not retaliate against you for filing a complaint. You may also contact our privacy officer if you have questions or comments about our privacy practices.

Health Information Exchange

Parkview Medical Center participates in a health information exchange (HIE) network. HIE provides a way to securely and electronically share patients' clinical information with other physicians and other health care providers participating in the HIE network to provide safer, more timely, efficient, and higher quality care. If you would like to opt out of the HIE you may do so by signing an Opt Out form available in the Health Information Services Department (HIS). If you have completed an Opt Out form and then wish to opt in you will have to sign the Opt In form available in the HIS Department.

PATIENT RIGHTS

As a patient of Parkview Medical Center, patients have the right to receive respectful and considerate care. The hospital respects, protects, and promotes patient rights. In addition, patients have the right to:

- Considerate, safe, and respectful care (physical, emotional, or spiritual) - and to be free from neglect, exploitation and verbal, mental, physical, and sexual abuse.
- Respectful, civil language and conduct in interactions with all staff and licensed independent practitioners.
- Have your cultural, psychological, religious, spiritual, personal values, beliefs, and preferences respected and accommodated.
- Be involved and participate in the ethical, spiritual, financial and medical aspects of your care, treatment and services, including the assessment and management of your pain and the right to have your family member(s), support person(s) and physician whom you identify promptly notified of your admission to the hospital.
- Be informed and kept safe if there are any proposed types of care, treatment, or services involving research, investigation, and clinical trials that patients are asked to participate in. Patients can refuse to participate at any time and will not jeopardize their access to care, treatment, or services unrelated to the research.
- Accept or refuse treatment to the extent permitted by law, and to be informed of the consequences of such action. Except in emergencies, this information shall include a description of the procedure or treatment, the medically-significant risks involved, alternative courses of treatment, and the benefits. You can always expect protection for your safety during any procedure. Your physician will be notified when you refuse treatment.
- Make advance directives (living wills, medical durable power of attorneys, organ donations, etc.) to the extent permitted by law, and to review, revise or rescind any advance directive at any time. Patients will be informed under what circumstances an advance directive will not be honored (i.e. until the directive or physician's order is present in the medical record).
- Have a surrogate decision maker appointed for you. If you are unable to make your own decisions about care, treatment or services, in accordance with State law, the hospital involves/identifies a surrogate decision-maker to assist in making these decisions. We will respect your decision or your surrogate decision-maker's decision about your right to refuse care, treatment, and services, to the extent permitted by law.
- Involve your family or support person in care, treatment, and service decisions to the extent you or your surrogate decision-maker permit/allow, in accordance with law and regulation. We will provide you or your surrogate decision-maker with information about: Your outcomes of care, treatment, and services that you need in order to participate in current and future health care decisions and unanticipated outcomes of your care, treatment, and services that are sentinel events as defined by the Joint Commission. This information will be provided by the hospital physician managing your care, treatment and services or his or her designee.
- Know the name of the physician who has primary responsibility for coordinating your care, treatment and service, and know the names of others who are involved in your care and what they will be doing. All Parkview employees are identified by a name badge and are encouraged to introduce themselves when in the presence of a patient or family member.
- Obtain information as to the professional relationships between healthcare professionals and institutions involved in your care.
- Receive information from your physician about your illness, course of treatment, and prospects of recovery in terms you can understand.
- Express complaints and grievances and have them reviewed by the hospital.
- Be informed of responsibilities related to a patient's care, treatment and services and hospital rules that apply to patients, their family or support person.

Your Right to Access Care

Parkview Medical Center is dedicated to creating a safe, secure, healing environment and to providing respectful, compassionate care to every patient seeking services at our facilities. We will provide access to medical treatment regardless of age, race, color, ethnicity, religion, culture, language, physical or mental disability, sex, sexual orientation, gender identity, gender expression, national origin, political affiliation, or ability to pay. Our focus is to maintain and promote an environment that provides the highest quality of services for everyone and that all shall be treated in a professional manner and with dignity, compassion, and respect.

Your Right to Effective Communication

All patients have the right to receive information in a manner he or she understands and tailored to their age, language, and ability to understand. In addition, patients having vision, speech, hearing, cognitive impairments or language barriers, have the right to effective communication. Parkview respects this right and need by providing tools and services that promote effective communication between patients, family, support person and hospital staff. Communication services are free of charge and will be offered in a timely manner and without discrimination. In addition, if you use personal devices such as glasses or contact lenses and hearing aids, you will be asked upon admission if you have these personal items with you. Staff will continue to ask about these items throughout your hospital stay to ensure they continue to be present and available for your use. Our staff will evaluate your oral and written communication needs to ensure we identify the appropriate communication method for you.

Language Barrier - Interpreter Services

For those who are deaf, non-English speaking or limited English speaking, the hospital provides American Sign Language and foreign language interpreters using video remote interpreting on an iPad or workstation on wheels; telephonic interpreting on a 2-handed phone set, speaker phone or 3-way phone conference call; and in-person, live American Sign Language interpreters. In addition, translated or plain language materials are available. Hospital staff can assist patients, family or other support person 24 hours a day, 7 days a week in getting interpreter services.

Hearing & Vision Impairment

Our hospital can provide assistive hearing and vision devices, amplified TTY/TDD and CapTel phones, closed captioned television, communication picture tool books, translated, plain language and large print materials, offering to read information out loud, or offering writing materials. In addition, if you have needs or concerns that require special attention or equipment, please inform a hospital staff member 24 hours a day, seven days a week. We will make every effort to make you as comfortable as possible during your stay.

Cognitive Impairment

Referrals to Speech and Occupational Therapy may be needed or we may ask for involvement from your family, legal guardian or other support person for assistance. Talk to your nurse for more information.

For additional needs or concerns Contact the Colorado Commission for the Deaf and Hard of Hearing, Dept. of Human Services, 1575 Sherman Street, Denver, CO 80203, 720-457-3679 (VP/Voice), 303-866-4824 (voice), 303-866-4831 (fax), email.ccdhh@state.co.us,www.ccdhh.com if you have additional needs or concerns.

Your Right to Privacy and Confidentiality

Parkview protects every patient's privacy. The hospital may receive inquiries about your condition. To respect your privacy, only general condition reports will be given to the public. You are provided the option to "Opt out" of our hospital facility directory during the admission process. Your diagnosis or condition may also preclude you from listing in the facility directory, thus, no confirmation of your stay, location or general condition may be shared when inquiries are made from the public. Any personal information about your treatment or diagnosis must come from your physician, and can only be given to you or members of your family whom you designate to receive it. Medical records and all communication pertaining to the patient are confidential. You have the right to access and review your medical records unless your doctor feels it is not in your best interest. (The information can be made available to an appropriate person on your behalf, if the proper releases are signed.) In addition, you have the right to request amendment to and obtain information on disclosures of your health information.

No Photography, Filming or Voice Recording Policy

Patients, employees, volunteers, visitors or medical staff may not be photographed, filmed or voice recorded without his/her (or parent/guardian) written consent. This includes, but is not limited to, purposes of medical study, research observations, proof of treatment, news/media releases, public relations or any other purpose which is not related to the patient's treatment or is not a part of the patient's medical record. A "Consent to Photograph/Filming/Voice Record" form will be completed to ensure the privacy and confidentiality of the patient, as well as Parkview employees, volunteers, medical staff and visitors.

- Patients, employees, volunteers, medical staff and visitors have a right to refuse to be photographed, filmed or voice recorded, to request cessation of photographing, filming or voice recording, or to rescind permission for use of recorded images.
- Patients, family members, visitors or employees are not permitted to take photographs or recordings of patient procedures, medical equipment, patient records, or diagnostic images to include, but not limited to, MRI, X-ray, CT Scan, Mammography or Ultrasound images.
- Parkview governs what occurs within its facilities and may deny any request to photograph, film or voice record for any reason.
- If staff is aware of any attempt to photograph, film or voice record a patient, staff, physician or volunteer by anyone, including a patient, then staff must take reasonable steps, including a call to Security, to stop the activity.
- Failure to adhere to this policy may result in disruption or discontinuation of patient care and may result in removal from facilities.

In addition, patients, family members or visitors may not photograph or record pictures of diagnostic images, results, reports on computer screens or documentation contained in their own medical record or another individual's medical record. An "Authorization to Release Medical Information" must be filled out and signed by the patient to obtain patient health information (PHI). Requests for copies of medical records should be directed to Health Information Services on the 6th floor of the Main Hospital or by calling the Release of Information Coordinator at 719.595.7122.

Your Right to Transfer

If it is in your best interest to be moved to another facility, you will be informed by your physician. We will help locate alternate services or facilities for you.

Your Right to Patient Visitation

- You have the right to have your family, or a person you identify, and your physician notified of your admission to the hospital, if you give permission to hospital staff to contact them.
- You have the right to have a support person of your choice, whomever that may be, in your presence during the course of your stay at Parkview Medical Center, unless that person's presence infringes on the rights or safety of others, or if it adversely affects your medical condition. This person must be able to care for themselves while they are visiting you.
- You have a right to receive visits by family and friends as long as it has a favorable effect on your overall health and well-being.
- You have the right to enjoy full and equal visitation privileges that are consistent with your individual preferences. It is your right to consent, withdraw, or deny visitors at any time.

Smoking/Tobacco/Alcohol/Weapons/Physical Violence

Parkview provides a smoke and tobacco-free environment for its patients, employees, physicians, and visitors. Smoking of tobacco products, including smokeless tobacco products, vapor cigarettes and marijuana is not permitted in any building, or on any properties owned or leased by Parkview, including Parkview's main campus, all annex buildings, the Medical Office Building, Greenwood Office Building, Blonde Office Building, Employment Office, ParkWest Medical Complex, Health Plaza North, Pueblo West Emergency Department, parking garage, all parking lots, any lawns, or on any properties Parkview may acquire in the future. Per Pueblo City Ordinance 7938, smoking is prohibited on public rights-of-way surrounding hospitals and hospital-owned and leased properties, meaning smoking is not allowed on sidewalks or in alleys surrounding Parkview-owned or leased properties. Violation of this ordinance is a Class 2 municipal offense.

In addition, because Parkview Medical Center strives to provide a safe, healing environment for everyone, all who enter our public entrances are required to be screened through a metal detector. Alcohol, illegal substances, firearms or weapons of any kind are not permitted and physical violence of any type will not be tolerated and will be reported to Security and law enforcement as appropriate. Administration supports staff in pressing charges for aggressive behavior they encounter while caring for the patients.



New Gender Identity Questions & Information

Do Ask, Do Tell: Talking to your health care provider about being LGBT

New Gender Identity Questions: Information for Patients

We recently added new questions about gender identity to our registration forms.

Our medical center thinks it is important to learn this information from our patients. The following are some frequently asked questions about why we are asking these questions and how the information will be used.

Q: WHY AM I BEING ASKED ABOUT MY SEXUAL ORIENTATION AND GENDER IDENTITY?

Every patient has unique health needs. Learning about gender identity will help us to deliver appropriate health services and culturally sensitive care to all our patients.

Q: WHAT IS GENDER IDENTITY?

Gender identity is a person's inner sense of their gender. For example, a person may think of themselves as male, as female, as a combination of male and female, or as another gender.

Q: WHAT DOES TRANSGENDER MEAN?

Transgender people have a gender identity that is not the same as their sex at birth.

- **Transgender man (FTM)** describes someone assigned female at birth who has a male gender identity.
- **Transgender woman (MTF)** describes someone assigned male at birth who has a female gender identity.
- **Genderqueer** describes someone who has a gender identity that is neither male nor female, or is a combination of male and female.

Q: WHAT IS SEXUAL ORIENTATION?

Sexual orientation is how a person describes their emotional and sexual attraction to others. This is separate from gender identity.

- **Heterosexual (straight)** describes women who

are emotionally and sexually attracted to men, and men who are emotionally and sexually attracted to women.

- **Gay** describes a person who is emotionally and sexually attracted to people of their own gender. It is most commonly used when talking about men.
- **Lesbian** describes a woman who is emotionally and sexually attracted to other women.
- **Bisexual** describes a person who is emotionally and sexually attracted to people of their own gender and people of other genders.

Q: HOW DO I CHOOSE THE CORRECT INFORMATION?

There is no right or wrong answer. If you don't find an answer that fits, you can choose "Additional Gender Categories" or you can talk with your provider.

Q: WHO WILL SEE THIS INFORMATION?

Your provider(s) will see this information, and it will become part of your medical record. In addition, a few other staff will have access to this information. Your information is confidential and protected by law, just like all of your other health information.

Q: WHAT IF I DON'T WANT TO SHARE THIS INFORMATION?

You have the option to check the box "Choose not to disclose." Later, your provider may ask you these questions privately during your visit. You can choose whether to share this information at that point, and/or you can ask your provider more questions.

Q: HOW WILL THIS INFORMATION BE USED?

Your provider(s) will use this information to help meet your health care needs. In addition, gathering this information from all patients allows the health center to see if there are gaps in care or services across different populations. Learning this tells us if we need to improve the care we give to our patients.



Do Ask, Do Tell: Talking to your health care provider about being LGBT

COMING OUT TO YOUR PROVIDER

Coming out to your health care provider is an important step to being healthy. Many people are not aware that lesbian, gay, bisexual and transgender (LGBT) people face unique health risks, such as higher smoking rates, a greater risk of suicide attempts, and a higher chance of getting certain sexually transmitted diseases. Talking with your provider can help you overcome these issues and access the care you need most. Being open about your sexual orientation, sexual behavior, and gender identity not only helps your provider, it helps you!

Reasons to come out:

- Your provider can offer care that is personalized and most relevant to you.
- Your provider can offer referrals to specialists, like behavioral health providers and other wellness providers, who are welcoming to LGBT people.
- Your provider can be sensitive to current health trends that affect LGBT people.
- Health care is about the whole person. By being open with your provider, you allow him/her to provide you with comprehensive care that supports your mind, body and spirit.

ACCESS TO CARE AND RESOURCES

There are many resources for LGBT patients seeking medical care and advice. Here are a few you may be interested in.

Want more information about LGBT health care? The National LGBT Health Education Center has publications and resources for patients and providers: www.lgbthealtheducation.org

Want more information about transgender health issues? The Center of Excellence for Transgender Health has many resources: www.transhealth.ucsf.edu

Want information about health care organizations that demonstrate a commitment to LGBT health care? The Human Rights Campaign (HRC) publishes a Health Equality Index yearly: www.hrc.org/hei

Want additional support for your friends or family? Parents and Friends of Lesbians and Gays (PFLAG) publishes lists of organizations it partners with and local groups for support, education, and advocacy: www.pflag.org

FREQUENTLY ASKED QUESTIONS

I don't want anyone besides my provider to know that I'm gay/lesbian/bi/trans. Will this information be shared? Your provider will keep conversations you have confidential. Your health care provider is bound by laws and policies to keep your information private. If you are under 18, these laws will vary by state and policies may vary by medical practice. You can also ask your provider not to enter this information into your medical record.

What if my provider uses the wrong terms or pronouns when referring to me or my spouse/partner? Providers may not always know what terms you prefer to use. Let them know how you describe yourself and your partner(s), and they should start to use those words.

What if I still don't feel comfortable discussing this with my current provider? There are several ways to find a provider you connect with. To start, you can talk to friends or use the resources in this brochure. Finding a provider you are comfortable with is essential to your all-around health and wellness.

Thank you to The Fenway
Institute for sharing content.



NATIONAL LGBT HEALTH
EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE

PATIENT RESPONSIBILITIES

To Promote a Safe & Speedy Recovery

1. Rest is an important part of recovery from your illness or surgery. We expect your family and friends to follow Parkview visiting hours (8 am-8 pm) and please limit visitors to 2 people in your room at one time.
2. Use Parkview Quiet Time from 1:30-3:30 p.m. daily to rest and avoid outside activity or distraction.
3. Be respectful and avoid using offensive language and/or behavior.
4. If your medical condition (approved by your doctors and nurses) allows, you are expected to take part in activities of daily living: bathing or showering (as needed), allowing us to change your bed and gown, brushing your teeth, cleaning your dentures, and feeding yourself.
5. Take part in all therapies and treatments as ordered by your doctors.
6. Your hospital-provided meals and diet are planned to provide plenty of nutrition. Eating food or drink from outside Parkview (fast food or prepared by a visitor) may cause problems with your medical condition.
7. Give all medications you bring into Parkview to your nurse or ask your family/friend to take them home. Do not take medications that are not given to you by your nurse.
8. Work with your nurses and doctors to help them address your pain using the following: Ask what to expect, discuss pain relief choices, help make a pain relief plan, ask for pain relief drugs when your pain first begins, help measure your pain.
9. When children are visiting they must always be supervised (not by you). If their behavior is interfering with your rest and healing or the rest and healing of other patients around you, the staff will ask that they be taken home. Be aware that children under age 12 may experience emotional worry when you are a patient.
10. Your family/friends/guests must be able to care for themselves while visiting you in the hospital.
11. Do not leave your room or the patient care unit without asking your nurse.
12. Parkview Medical Center is a tobacco-free campus. No smoking, dipping, or chewing tobacco is permitted in the hospital or anywhere on hospital property. This includes the use of e-cigarettes, vapor pens, marijuana smoking, marijuana edibles or topical creams.
13. Avoid entering non-patient areas: utility rooms, employee break rooms, nurses' stations, and secured areas. These areas are for employees only.
14. Food and beverages provided in refrigerators on patient care units are for patients only.
15. Send home valuable personal property with family/friends or use the safe found in your patient room to lock up your personal belongings. Let your nurse know if you have personal property you would like to have locked in the Parkview Security Department.

Thank you for your cooperation in embracing patient safety and promoting the best healing environment possible. Please contact your nurse for assistance if you, your family or friends have any questions or concerns about these patient responsibilities.

PROPOSITION 106

Colorado End-of-Life Options Act (“the Act”) – was approved by voters in November 2016 and went into effect on December 16, 2016. The Act allows Colorado residents with a terminal illness to request and self-administer medical aid-in-dying medication from a physician under certain conditions.

Patients have the right to request, but not the right to receive, medical aid-in-dying medications from any health care provider. Health care professionals and facilities, including hospitals, may opt-in or opt-out of participation in the Act.

Parkview has decided to opt-out of participation under the Act. When a patient expresses intent to request medical aid-in-dying medication, the patient will be informed that Parkview and its physicians employed or under contract will not participate in providing medical aid-in-dying medication for self-administration on the HOSPITAL premises.

Parkview will continue to provide all other care, including requested end-of-life and palliative care, to patients and families, regardless of their stated interest in seeking medical aid-in-dying. We recognize that many of our patients and families will pursue medical aid-in-dying and we respect the individual right to make these personal and difficult decisions.

Parkview will cooperate with patient requests to transfer to a facility that is participating in the Act. Parkview will notify patients in writing of its decision to opt-out in the admission packet and other means intended to provide advance written notification. We will continue to provide the highest quality of health care to all the people we serve.

Thank you,

Jim Caldwell, MD
VP of Medical Affairs

YOUR ACCOMMODATIONS

Patient Meals

Wholesome, nourishing, and well-balanced meals are an important part of your recovery. Parkview provides nutritious meals which are prepared according to your doctor’s orders.

Following your arrival, your doctor will determine what type of diet you should receive and the nursing staff on your unit will provide you with a room service menu. You may order your meals any time between 7:00 a.m. and 7:00 p.m. by calling 719.595.7775. Meals may be ordered up to 24 hours in advance. If your doctor prescribes a special diet, the call center associate will assist you in making the proper selections. If you need additional help with ordering your meals, please inform your nurse. If you would like to talk to a registered dietitian while you are in the hospital, ask your nurse to have a dietitian visit you. A registered dietitian will be happy to provide information regarding your diet or assist you with other special nutrition needs.

Phones and TV

Most patient rooms at Parkview are equipped with phones and televisions. Local calls may be placed by dialing "9" and then the local number. Long-distance calls are placed through the hospital operator and must be collect, or billed to a patient's home phone or credit card. To turn the TV on/off, change channels, or adjust the volume, use the remote control.

Personal Electrical Equipment

Patients may use personal electrical equipment (hair dryers, razors, radios, etc.) only if it meets with nursing approval and is not disturbing to other people. If the safety of the equipment is in doubt, our Biomedical Engineering Department will inspect it to determine whether it can be approved for use in the hospital. Ask your nurse if you have questions.

Mail, Flowers and Newspaper Delivery

Mail, packages, flowers and newspapers will be delivered to you by a hospital volunteer. If you have outgoing mail, give it to your nurse or a volunteer to be mailed. Your address at the hospital is: **Your Name & Room Number, Parkview Medical Center, 400 W. 16th St., Pueblo, CO 81003**. Mail received after your discharge will be forwarded to your home address. Flowers delivered after your discharge will not be accepted.

Calling Your Nurse/Hourly Rounding

A button to call your nurse is located on your TV remote control, and in the bathroom. When you press the button, the nursing station is alerted that you need assistance. A staff member will respond to your signal as soon as possible. In addition, your nurse will provide a direct phone number to reach them immediately.

Internet Services

Parkview offers free wireless internet access for patients, guests and visitors. Access will allow use to a wireless mobile device such as a laptop computer, tablet computer, or smartphone, equipped with an internet browser and wireless capabilities. The name of the hospital's guest network is parkguest. Our Information Technology Department is happy to offer connectivity assistance, please call our HELP desk at 719.584.4357 if you are encountering difficulties.

Lost and Found

Articles or valuables found after discharge will be sent to lost and found located in Security at 719.584.4320. If you or a family member have lost something, notify your nurse immediately. **Remember!** Glasses, dentures, contact lenses, hearing aids and other items should never be wrapped in tissue, or placed in basins or medication cups.

Gift Shoppe

Parkview volunteers operate a gift shop in the lobby of the main building. Flowers, greeting cards, candy, and unique gifts are available for purchase. Gift Shoppe profits are used to purchase new equipment for the medical center. Visitors should check with the nurse before bringing gifts of food or drinks to patients. Some gifts such as food, fresh flowers, and live plants are not permitted in the ICU/NTICU units.

Spiritual Care Resources

Our chaplain team consists of a Spiritual Care Director for Protestant needs and a part-time priest for Roman Catholic needs. They can be reached by dialing "0" and asking the operator to page either of them. Patients may always call their own minister. The chaplains are here to assist you and your family in:

- Rejoicing
- Contacting your pastor
- Visitation
- Spiritual care issues
- Just to listen
- Anointing of the sick
- End of life issues
- Holy communion
- Depression
- Tough decisions
- Advance directives
- Bioethical concerns
- Baptisms
- Christenings

For more information, call 719.584.4478 or 719.584.7306.

Chapel Services

The chapel (6th floor) is available for meditation, private prayer, and clergy consultation. Worship services held Mondays, Tuesdays and Wednesdays at 12:00 p.m. Holy Communion available for Roman Catholic or Protestant patients and their families in patient rooms daily, except Saturday.

FOR YOUR FAMILY AND FRIENDS

Parking

Visitor parking is available in the parking garage located on Grand Avenue across from the main entrance. If visitors prefer, they may use our valet parking service, which is available at the main entrance Monday through Friday 5:30 a.m. to 8:30 p.m. **Please note:** access to the hospital from the parking garage through the SkyBridge closes at 6:00 p.m. daily, including on the weekends and holidays.

Guest Meals

For visitors and guests looking for a place to eat, we suggest one of the following options:

Café Perkview - conveniently located in the lobby by the main entrance

Open daily 6:30 a.m. to 11:30 p.m. Come in and get a cup of freshly brewed coffee or made-to-order lattes. We serve a variety of freshly prepared grab & go items, including daily specials, soups, salads and sandwiches.

The 17th Street Café (cafeteria) - located in the North Annex on the 4th floor

Open Monday-Friday 6:30 a.m. to 3:00 p.m. We feature daily specials, soups, salads, sandwiches made to order grill items and fresh baked pizzas.

Guest trays - Guest trays are available for the convenience of guests and family members from 7:00 a.m.-7:00 p.m. at the cost of \$7 per tray. Vouchers may be purchased at either 17th Street Café, Café Perkview or you may pay in cash upon delivery of your tray.

Vending machines - Located throughout the hospital for a quick snack or drink.

Visitor and Patient Safety

- Pay attention to all safety signs
- Pay attention to isolation precautions and ask the nurse if there is something you don't understand prior to entering a patient room
- Wash your hands or use the hand gel provided, before and after visiting
- Follow the direction of the health care team including nurses, physicians and therapists
- Visitors and their children should wear socks and shoes while at the medical center for their infection-control protection

Overnight Lodging

The following local lodging offers competitive rates and discounts for out-of-town guests. Call to inquire about room availability and reservations.

Best Western Eagleridge Inn & Suites, 4727 N. Elizabeth St., 719.543.4644

Clarion Inn & Conference Center, 4001 N. Elizabeth, 719.543.8050

Comfort Inn, 4645 North Freeway, 719.542.6868

Days Inn-Pueblo, 4201 N. Elizabeth, 719.543.8031

Econo Lodge, 4615 N. Elizabeth, 719.542.9933

Edgar Olin House Bed & Breakfast, 727 W. 13th St., 719.544.5727

Hampton Inn & Suites - North, 4790 Eagleridge Circle, 719.543.6500

Hampton Inn & Suites, 3315 Gateway Dr., 719.566.1726

Holiday Inn Express & Suites, 4530 Dillon Dr., 719.542.8888

La Quinta Inn & Suites, 4810 N. Elizabeth St., 719.542.3500

Courtyard by Marriott Pueblo, 110 W. 1st St., 719.542.3200

Marriott SpringHill Suites, 150 S. Santa Fe Ave., 719.546.1234

Microtel Inns & Suites, 3343 Gateway Dr., 719.242.2020

Quality Inn & Suites, 3910 Outlook Blvd., 719.544.5500

Ramada, 4703 N. Freeway, 719.544.4700

Super 8 Motel, 1100 Hwy 50 West, 719.545.4104

Wingate by Wyndham, 4711 N. Elizabeth St., 719.586.9000

HOSPITAL-WIDE VISITATION GUIDELINES

It is the goal at Parkview to maintain a quiet, restful environment for all patients.

- Short visits are recommended as these are better tolerated by the patient.
- Considerations should be taken to provide for privacy and confidentiality. For example, curtains pulled, speak in low voice, no congregating in the halls.
- Quiet time has been established to allow patients time to rest – visitors are asked to respect these designated times.
- No photography allowed.
- Please be respectful of others by silencing and delaying cell phone use while in patient care areas.
- All prisoner visitation will follow the policy and restrictions of the facility in which they have been incarcerated.

General Visitation

8:00 a.m.-8:00 p.m. daily

To promote a restful environment and to protect the health and safety of our patients, daily visitation begins at 8:00 a.m. and ends at 8:00 p.m. This is also to prevent unauthorized use of Parkview facilities and property. Specialty areas such as ICU, NTICU, MICU, Labor & Delivery and Postpartum/GYN, Nursery, Kidsville Pediatric Unit and Psychiatric Units have their own specific visitation hours; ask staff in these areas about their visiting hours.

- No overnight visitors are allowed in semi-private rooms in an effort to promote privacy and rest to both patients in that room.
- When children are visiting, they must always be supervised (not by you). If their behavior is interfering with your rest and healing or the rest and healing of other patients around you, the staff will ask that they be taken home. Be aware that children under age twelve may experience emotional worry when you are a patient.
- Your family/friends/guests must be able to care for themselves while visiting you in the hospital.
- Physical violence of any type will not be tolerated and will be reported to security and law enforcement as appropriate.
- For behavior management of agitated patients, visitors are limited and are required to check in at nursing stations.
- No alcoholic beverages or tobacco products, including medical or recreational marijuana, are permitted in the hospital at any time.
- No illegal substances are permitted in the hospital at any time and will be reported to security and law enforcement.
- No firearms or weapons of any kind are permitted in the hospital at any time.
- For the safety of our patients, all visitors should wash hands or use antibacterial foam or gel prior to visitation.
- For safety reasons, visitation may be limited when the patient is in isolation precautions due to an infectious disease – all visitors are required to follow any isolation precautions that have been instituted.
- Persons with any signs of illness (elevated temp, cough, sneezing, diarrhea, cold, strep throat, cold sores, etc.) are asked not to visit until they are well.

Family and Visitor Involvement with Care

We encourage the family/patient support person(s) to participate in the care of the patient, if they choose. This may include bathing, back care, turning, repositioning, ambulating, hair care, oral care, treatments to be performed at home, and other care that may be identified.

- We encourage the family/patient support person(s) to be involved during teaching whenever possible.
- We will evaluate through, interview and observation, the effectiveness of family/patient support person(s) involvement and adjust the plan for participation accordingly.
- Children shall be supervised by an adult, other than the patient, at all times.

Justified Clinical Restrictions

When appropriate, Parkview will impose justified clinical restrictions (any clinically-necessary or reasonable restriction which may limit visitation to the patient). Examples include, but are not limited to, the following:

- Infection-control issues either with the patient or roommate.
- Extraordinary protections because of a pandemic or infectious disease outbreak.
- Visitation that may interfere with the care of other patients.
- Agitated patients requiring behavior management.
- The patient is undergoing care interventions.
- The patient needs rest or privacy.

- A court order limiting or restraining contact.
- Inpatient substance abuse treatment programs that have clinical necessary protocols.
- Disruptive, threatening or violent behavior of any kind.
- Need for privacy or rest by another individual in the patient's shared room.
- Reasonable limitations on the number of visitors at any one time.

Visitation for Incapacitated Patients

Parkview will require proof of a relationship between a patient and a visitor only when the patient is incapacitated and there is a clear dispute between two or more people over whether a particular person should be allowed to visit. The following may be forms of proof: an advance directive naming the individual support person; approved visitor or designated decision-maker; shared residence; shared ownership of a property or business; financial interdependence; marital/relationship status; existence of a legal relationship recognized in any jurisdiction; and acknowledgment of a committed relationship (i.e., an affidavit). This list is not intended to be exhaustive of all potential sources of information regarding proof of a relationship to allow patient visitation or support person preferences.

FOR YOU AND YOUR VISITOR'S SAFETY AND SECURITY

Valuables



Patients are asked not to bring items of value to Parkview. If you bring valuables, a patient room safe is available. Items should be deposited in the safe or given to security. If given to security, a written receipt of all items will be given (placed in your chart), which must be presented to withdraw items. Parkview does not accept responsibility for items unless they are deposited and placed in the Security Office. 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 security. Inquire about lost articles by calling 719.584.4320.

Medications From Home



If you bring medications with you to the hospital (aspirin, birth control pills, etc.), your nurse must be informed. The nurse will direct you to send the medications home for safe keeping with family/support person. If arrangements can't be made, security will lock them for safekeeping until discharge or until arrangements can be made. Prescribed medical and recreational marijuana are not permitted. If it is brought to the hospital, you will be directed to send it home. If no arrangements are made, it will be destroyed. All medications taken while at Parkview must be prescribed by your physician, dispensed by the hospital pharmacy, and administered by a nurse. Patients are not permitted to self-administer their own drugs, or keep personal medications at their bedside.

Smoking/Tobacco/Alcohol/Weapons/Physical Violence



Parkview provides a smoke and tobacco-free environment for its patients, employees, physicians, and visitors. Smoking of tobacco products, including smokeless tobacco products, vapor cigarettes and marijuana is not permitted in any building, or on any properties owned or leased by Parkview, including Parkview's main campus, all annex buildings, the Medical Office Building, Greenwood Office Building, Blonde Office Building, Employment Office, ParkWest Medical Complex, Health Plaza North, Pueblo West Emergency Department, parking garage, all parking lots, any lawns, or on any properties Parkview may acquire in the future. Per Pueblo City Ordinance 7938, smoking is prohibited on public rights-of-way surrounding hospitals and hospital-owned and leased properties, meaning smoking is not allowed on sidewalks or in alleys surrounding Parkview-owned or leased properties. Violation of this ordinance is a Class 2 municipal offense.

In addition, because Parkview Medical Center strives to provide a safe, healing environment for everyone, all who enter our public entrances are required to be screened through a metal detector. Alcohol, illegal substances, firearms or weapons of any kind are not permitted and physical violence of any type will not be tolerated and will be reported to Security and law enforcement as appropriate. Administration supports staff in pressing charges for aggressive behavior they encounter while caring for the patients.

Fire or Disaster Drills



We perform practice drills periodically to ensure all staff know what procedures to follow in the event of an emergency situation. If there is an actual emergency, a staff member will assist you in moving to a safe location.

During a fire drill, you will hear "Attention! Code Red. This is a drill." announced overhead, accompanied by the actions of staff members who will be performing certain functions, such as closing doors and windows, arranging records, and generally simulating the preparations for evacuation or movement to an area of safety, if it were to become necessary. This noise may be annoying or distracting for you. However, our concern for your safety is of utmost importance. We appreciate your understanding.

Rapid Response Team



Parkview Medical Center has a Rapid Response Team consisting of critical care nurses and respiratory therapists. This team's purpose is to assist hospital staff when a change in a patient's condition occurs. Parkview's staff, physicians, patients or families may call for the Rapid Response Team. As a patient or family member, if you are concerned about a change in condition you may ask your nurse to activate the Rapid Response Team. Based on the patient assessment performed by the Rapid Response Team, additional treatments and care may be started. Questions regarding tests, medications, treatments, discharge plans and other routine care issues should be referred to your nurse or physician.

YOUR HEALTH CARE TEAM

The Medical Staff

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

The Nursing Staff

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

Technicians and Therapists

You may be served by a number of technicians and therapists from Diagnostic Imaging (X-ray), Laboratory, Respiratory Therapy, Occupational Therapy, Physical Therapy, Speech Therapy, Registered Dietitians, and other departments. All of these health professionals are licensed and/or certified for their specific duties.

FINANCES

Patient's Payment Responsibility and Available Payment Options:

Parkview Medical Center serves anyone in need of care without regard to race, creed, or ability to pay. As a non-profit institution, Parkview depends on income from patients and their insurance companies or various government health programs, such as Medicare or Medicaid, to maintain and make necessary improvements in our services.

Any portion of hospital billing that is not covered by insurance becomes the patient's responsibility.

Co-payments are due at time of registration. Parkview Medical Center accepts payment by cash, check, and credit card (MasterCard, VISA and Discover). Financing can be arranged.

Do you need help financing your care at Parkview? Ask about our 0% interest lines of credit. There's no qualifying or credit check. If you have a permanent address and feel that you can make a reasonable payment, we will help you get funding for your deductibles, co-insurance and co-pays. Contact the business office at 719.584.4045 or visit www.parkviewmc.com/financing.

If you are covered by Medicare, we will need a copy of your Medicare card to verify eligibility and process your Medicare claim. You should be aware that the Medicare program specifically excludes payment for certain items such as self-administered drugs, personal comfort items, hearing evaluations and other items. Deductibles and co-payments are also the responsibility of the patient and are due at time of registration.

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. Co-payments are due at time of registration.

If you are covered by another insurance, you will need to furnish a copy of your card at the time of your admission. Parkview will then bill your insurance company.

Parkview Medical Center also participates in the Colorado Indigent Care Program. If you are not eligible for Medicaid or the Colorado Indigent Care Program, the hospital can offer financial assistance. Call 719.584.4508 for more information.

<p>Medicaid is Now...</p>  <p>Health First COLORADO Colorado's Medicaid Program</p> <p>New Name. Same Great Coverage.</p> <p>HealthFirstColorado.com</p>	 <p>No Insurance? Need health care coverage? Don't know where to start? Parkview's Eligibility Assistance Partners would like to help.</p> <p>Call 719.584.4508 58 Club Manor Drive</p>	<p>We specialize in:</p> <ul style="list-style-type: none">▪ Health First Colorado Colorado's Medicaid Program▪ Colorado Indigent Care Program
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Fees Not Covered

Your final bill will not include fees for professional charges of your physician, surgeon or any consulting physicians. For example, the bill does not reflect fees for professional services of the anesthesiologist, cardiologist, pathologist, or radiologist. These fees are billed directly to you or your health plan from the physician's office.

Parkview's Business Office team is available to assist you with understanding the billing process of the care you receive. We are able to provide an estimate of your financial responsibility, offer several payment options to meet your out-of-pocket expenses, and determine your eligibility for financial assistance programs. We have a range of payment options including a 0% interest line of credit. Our staff also helps acquire required referrals or authorizations by your insurance company, verify your coverage benefits, and bill your insurance provider.

Please contact our team to answer any questions you may have in relation to your medical billing. We are eager to assist you any way we can.

In addition to your hospital bill, you may also receive bills from doctors of **Parkview Medical Group** 719.595.7580. This is a separate bill for doctors who directly cared for you and may also be from doctors who you did not see face-to-face, but provided professional services rendered in diagnosing and interpreting test results while you were a patient at the hospital. If you have questions about these bills, please call the number printed on the statement. We look forward to the opportunity to serve you and welcome your questions.

BALANCE BILLING - KNOW YOUR RIGHTS

Beginning January 2020, Colorado state law protects you from “surprise billing,” also known as “balance billing.” These protections apply when:

- You receive covered emergency services, other than ambulance services, from an out-of-network provider in Colorado, and/or
- You unintentionally receive covered services from an out-of-network provider at an in-network facility in Colorado.

What is balance billing, and when does it happen?

If you are seen by a provider or use services in a facility or agency that is NOT in your health insurance plan’s provider network, sometimes referred to as “out-of-network”, you may receive a bill for additional costs associated with that care. Out-of-network facilities or agencies often bill you the difference between what your insurer decides is the eligible charge and what the out-of-network provider bills as the total charge. This is called “balance” or “surprise” billing.

When you CANNOT be balance billed:

Emergency Services

If you are receiving emergency services, the most you can be billed is your plan’s in-network cost-sharing amounts, which are copayments, deductibles, and/or coinsurance. You cannot be billed for any other amount. This includes both the facility where you receive emergency services and any providers that see you for emergency services.

Non-emergency Services at an In-network Facility by an Out-of-network Provider

Parkview Medical Center must tell you if you are at an out-of-network location or at an in network location that is using out-of-network providers. We must also tell you what types of services that you will be using that may be provided by an out-of-network provider.

You have the right to request that in-network providers perform all covered medical services. However, you may have to receive medical services from an out-of-network provider if an in-network provider is not available. In this case, the most you can be billed for covered services is your in-network cost-sharing amounts which are copayments, deductibles, and/or coinsurance. These providers cannot balance bill you for additional costs.

Additional Protections:

- Your insurer will pay out-of-network providers and facilities directly.
- Your insurer must count any amount you pay for emergency services or certain out-of-network services (described above) toward your in-network deductible and out-of-pocket limit.
- Your provider, Parkview Medical Center or agency must refund any amount you overpay within 60 days of being notified.
- No one, including a provider, Parkview Medical Center, or insurer, can ask you to limit or give up these rights.

If you receive services from an out-of-network provider or facility or agency in any OTHER situation, you may still be balance billed, or you may be responsible for the entire bill. If you intentionally receive non-emergency

services from an out-of-network provider or facility, you may also be balance billed.

If you think you have received a bill for amounts other than your copayments, deductible, and/or coinsurance, please contact Parkview Medical Center patient business services at 719.584.4045 or the Colorado Division of Insurance at 303.894.7490 or 1.800.930.3745. This law does NOT apply to ALL Colorado health plans. It only applies if:

- You have a "CO-DOI" on your health insurance ID card, and
- You are receiving care and services provided at a regulated facility in the state of Colorado.

Please contact your health insurance plan at the number on your health insurance ID card or the Colorado Division of Insurance with questions.

RESOLVING A PROBLEM

Complaints and Grievances

Parkview's patient representative or agent is available to all patients, family members and other interested people. This is the person through whom patients can seek solutions to problems or concerns, or just ask questions – treating all concerns with courtesy and respect.

Quality care and service are the primary concerns of all Parkview employees. If you or any of your family members have a comment, suggestion, complaint, or grievance about any aspect of your stay, or a special need for you or your family member, please contact our patient representative. Voicing a complaint or grievance will in no way compromise your access to care or treatment. Your feedback and suggestions are crucial to Parkview's quality-improvement efforts. Please let us know when your needs or expectations have not been met, or when they have been exceeded.

The patient representative can be contacted by calling 719.584.4496 and is available Monday-Friday, 8:00 a.m.-4:30 p.m. At other times, an administrative supervisor is available to assist you. You may reach the supervisor by dialing "0" for operator. Any concerns you have may be reported at any time before, during, or after care is received. If you are not happy with how we answer your concerns, you may ask to have your concerns sent to the head of the hospital. This person will respond in writing to you. You may also request that we send your concerns to the survey agency.

If you choose to do so, you may also contact the Executive Director of the Colorado Department of Health at 1.800.886.7689 or the Colorado State Board of Medical Examiners if the patient requests. Parkview Medical Center may also refer the grievance in writing to the Executive Director of the Colorado Department of Health or the Colorado State Board of Medical Examiners on the complainant's behalf.

Complaints or grievances may also be filed with the appropriate oversight board at the Division of Professions and Occupations at the Department of Regulatory Agencies (DORA). Forms may be found on the website <http://cdn.colorado.gov/cs/Satellite/DORA/CBON/DORA/1251650073558> or contact the DORA toll free number 1.800.866.7675.

Patients, or a patient's significant other, may also file complaints about a Joint Commission accredited organization by calling the Joint Commission toll-free at 1.800.994.6610 or email your complaint to complaint@jointcommission.org or go online to www.jointcommission.org/GeneralPublic/Complaint.

Additionally, patients with concerns regarding quality of care or premature discharge may contact the Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO) – KEPRO at 844.430.9504 or their address is: KEPRO, 5700 Lombardo Center Dr., Ste. 100, Seven Hills, OH 44131

Also, if you feel you have been discriminated against, you can file a complaint with the Office of Civil Rights (OCR) by doing the following:

Website - Use OCR's electronic complaint form at the following website: <http://www.ed.gov/about/offices/list/ocr/complaintintro.html>.

Mail/Fax - You may send information by mail or fax to the address or number available at this link. You may use OCR's Discrimination Complaint Form or write your own letter. If you write your own letter, please include:

- The complainant's name, address and, if possible (although not required), a telephone number where the complainant may be reached during business hours;
- Information about the person(s) or class of persons injured by the alleged discriminatory act(s) (names of the injured person(s) are not required);
- The name and location (city and state) of the institution that committed the alleged discriminatory act(s); and
- A description of the alleged discriminatory act(s) in sufficient detail to enable OCR to understand what occurred, when it occurred, and the basis for the alleged discrimination.

Email - You may email OCR's Discrimination Complaint Form or you may send your own signed letter to ocr@ed.gov. If you write your own letter, please include the information identified above.

For those without current email accounts, internet access may be freely available from your local public library, and free email accounts are available from several large providers.

Note: A recipient of federal financial assistance may not retaliate against any person who has made a complaint, testified, assisted or participated in any manner in an OCR matter or to interfere with any right or privilege protected by the laws enforced by OCR. If you believe that you have been retaliated against for any of these reasons, you also may file a complaint with OCR.

MANAGING YOUR PAIN IN THE HOSPITAL

Effective relief of pain is an important part of your medical care. If you are currently suffering in pain, you need to talk to your doctor or nurse so they can recommend treatment or prescribe medicine to help relieve your pain.

At Parkview we believe that all patients have the right to:

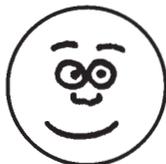
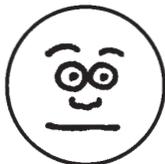
- Express your pain.
- Have that expression accepted and respected as the most reliable indicator of pain.
- Have your pain assessed.
- Have your pain managed.
- Receive a prompt response to unrelieved pain.
- Be informed and involved in all decisions regarding all aspects of your pain care.

Selecting Your Functional-Comfort Goal

Our goal is to ensure your pain is well controlled throughout your entire stay. One way we will evaluate this is by having you select a functional-comfort goal. Your functional-comfort goal is the number on the pain scale where you feel you need to be in order to function. In other words, the pain rating level you need to be at to get up and walk, eat your breakfast, work with therapy and so on. Unfortunately we are not always able to make pain “go away” entirely. The goal you set will be written on your care board and will tell the care team when something different needs to be done about your pain. Your care team will be assessing your pain frequently throughout your shift, but if at any point during your stay you are experiencing uncontrolled pain, please let any hospital staff member know so your pain can be addressed.

Comfort Treatments:

- Warm Blanket
- Ice packs
- Put arm/leg/head high up on pillow
- Change place in bed
- Get up to chair
- Hot pad
- Pillows
- Change position of bed
- Walk
- Warm shower

Pain Scale (Wong-Baker FACES)		Functional-Comfort Goal: <input type="text"/>		
				
1-3 Mild Pain Nagging, annoying, but doesn't interfere with most daily activities.		4-6 Moderate Pain Interferes significantly with daily activities.		7-10 Severe Pain Disabling; unable to perform daily activities.

TAKING RESPONSIBILITY FOR YOUR CARE

Here are some questions you may consider asking your physician, nurse or pharmacist.

Questions to ask about tests:

- What will this test show you?
- How accurate is this test?
- How will the results affect my treatment?
- What are the risks and possible side effects?
- What should I do before the test?
- What should I do following the test?
- How much will the test cost?

Questions to ask about proposed treatment and surgery:

- What are the benefits and risks?
- How soon will this improve my condition?
- Are there other treatments available?
- If I want a second opinion, is there another doctor you can recommend?
- If surgery is needed, can it be done on an outpatient basis?
- How long will I be hospitalized?
- What are the costs?

Questions to ask about prescriptions:

- Why do I need this medication?
- Are there any side effects?
- Is a less-expensive, generic drug available?
- Are there any special instructions?
- When should my symptoms improve?
- How long will I need to take this?
- Who can I talk about prescriptions?
- How can I get my prescription filled?
- Get your prescriptions filled before leaving the hospital at The Pharmacy at Parkview. Drop off and pick up most prescriptions on the same day. The pharmacy is open Monday-Friday 7 am-6 pm and Saturday 10 am- 2pm and is located on the lobby floor.

Questions to ask about discharge planning:

- How long will I be in the hospital?
- Will my daily activities be affected? If so, how?
- Will hospital personnel assist me with discharge plans?

PHYSICIAN COMMUNICATION

Are you nervous to ask your health provider questions? Don't be. You may be surprised to learn that your medical team wants you to let them know that you need help.

Like all of us, doctors have busy schedules. Your doctor wants you to know that he or she will always:

- Treat you with courtesy and respect.
- Listen to your concerns.
- Explain your condition and treatment in words you can understand.

We encourage you to ask your nurse to be with you when the physician is rounding to help clarify any topics discussed or treatments to anticipate.

When to Ask Questions

You can ask questions when:

- You see your doctor, nurse or pharmacist
- You prepare for a medical test or procedure
- You get your medicine

What If I Ask and Still Don't Understand?

Let your doctor, nurse, or pharmacist know if you still don't understand what you need to do. You might say, "This is new to me. Will you please explain that to me one more time?"

Tips for Clear Health Communication

Check off the ones you will try:

- I will bring a friend or family member to help me at my doctor visit.
- I will make a list of my health concerns to tell my doctor or nurse.
- I will bring a list of all my medicines when I visit my doctor or nurse.
- I will ask my pharmacist for help when I have questions about my medicines.

Adapted from Partnership for Clear Health Communication at the National Patient Safety Foundation. www.npsf.org/askme3. Retrieved July 5, 2012.

Q & A

1. Question/Concern: _____

Answer: _____

Q & A

2. Question/Concern: _____

Answer: _____

3. Question/Concern: _____

Answer: _____

4. Question/Concern: _____

Answer: _____

FALL PREVENTION

Help Us Keep You Safe

At Parkview Medical Center, we take fall prevention seriously. Please help us keep you safe by following the guidelines below. If you have any questions or concerns, please contact your nurse.

Fall Safety Plan

In an effort to protect you, we will develop a fall safety plan each shift. Whenever you feel unsteady, please alert staff immediately. We will assist you to a safe position on the floor, bed or chair.

If you have any safety concerns during your hospital stay please contact your nurse and view our patient safety video, which runs continually on channel 68.

Safety Guidelines:

Please call your nurse for assistance when you need to get out of bed.

A bed alarm may be used to remind you to call for help when getting out of bed.

Remember to wear properly fitting shoes or non-slip footwear when up. (If you need some, please notify your nurse).

Keep your nursing team notified should you see any spills or wet areas on the floor so they may be cleaned up quickly.

Verbalize to your nurse team if you use a walker, cane, or wheelchair at home, or if you plan to bring yours in for use while in the hospital. Keep these devices within reach and remember to use them.

Items needed for personal or daily use should be kept within reach.

Every time you need to get up, remember to sit at the side of the bed for a few minutes before you get up.

When you are up, do not use the bedside table or equipment (i.e. IV pole) for support as they have wheels and could roll away from you.

Why Falls Happen:

- Dizziness, weakness, or disorientation due to some medications and procedures. (If you are experiencing any of these symptoms, please notify your nurse.)
- Unfamiliar surroundings
- Catheter tubing, IV lines, or other medical equipment
- Not wearing appropriate footwear, or going barefoot

Our nursing staff does hourly rounds in patient rooms to help keep you safe and to ensure we are meeting all your needs.



We identify all patients with a 'High Risk for Fall' and 'High Risk for Injuries'. Parkview's Stumble Bee is a visual reminder to all staff members to pay extra attention to patients with this identifier.



PREVENTING FALLS One Step at a Time

Get some exercise: Lack of exercise weakens legs, which increases the chance of falling. Exercise programs like Tai Chi increases strength and improves balance, making falls less likely.

Be mindful of medications: Some medicines—or combinations of medicines – can have side effects like dizziness or drowsiness. This can make falls more likely. Have a doctor or pharmacist review all your medications to help reduce the chance of risky side effects.

Keep your vision sharp: Poor vision makes it harder to get around safely. To help make sure you're seeing clearly, have your eyes checked every year and wear glasses or contact lenses with the right prescription strength.

Remove hazards at home: About half of all falls happen at home. A home safety check helps identify fall hazards, like clutter and poor lighting that should be removed or changed.

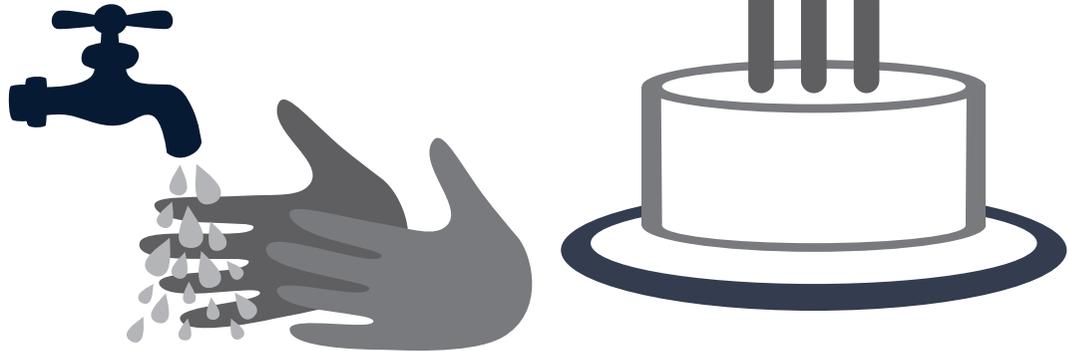
Sign up for Fall Prevention: This free program can help reduce falls and build confidence. To register, call 719.595.7183 or view upcoming classes at www.parkviewmc.com/events.

INFECTION PREVENTION IS EVERYONE'S BUSINESS

Parkview Medical Center strongly encourages you and your family to take an active role in infection prevention. Germs are spread through hand contact and droplets that are produced when you cough or sneeze. You can make a difference with proper hand hygiene and covering your cough. Make sure to cover your nose and mouth when you sneeze or cough. Contain the spread of germs with these easy steps:

- Use a tissue or upper sleeve to cover nose and mouth when coughing or sneezing.
- Dispose of the used tissue in the nearest waste receptacle after use.
- Wash your hands or use a hand sanitizer after you cover that cough or sneeze.
- Upon request we can provide patients with a Sani-Hands pack to allow patients to sanitize their hands at the bedside.
- Although you are in the hospital to get better, there is still the possibility of developing an infection. The best ways to stop the spread of germs is to wash your hands thoroughly with soap and warm water for 20 seconds.

Wash your hands for 20 seconds or the same time it takes you to sing the “Happy Birthday” song twice.



No soap? No problem. If soap and water are not available, alcohol-based hand cleaners are just as effective in killing germs. To apply, place the cleaner in the palm of your hand and rub your hands together, making sure you cover all the surfaces of your fingers and hands until they are dry. Get in the habit of using hand sanitizer when you are in public places, such as schools, malls, airports, sporting arenas and of course, the hospital. Clean your hands after:

- Touching objects or surfaces in the hospital room
- Before eating or preparing food
- After using the restroom
- After touching animals
- When leaving and returning to patient room

ISOLATION PRECAUTIONS

Special precautions, known as isolation precautions, are used to prevent the spread of germs that can cause disease. If you have an infection that requires these special precautions, you can expect the following:

- Your caregivers and visitors will put on gloves and wear a gown over their clothing while in your room. Sometimes a mask is required.
- When leaving the room, your caregivers and visitors need to remove their gown and gloves and cleanse their hands.
- Patients on special precautions are asked to stay in their hospital room as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They can, however, go to other areas of the hospital for treatment and tests.

Your health care providers know to practice hand hygiene, but sometimes they forget. You and your family should not be embarrassed to speak up and ask them to wash their hands. It is important for them to cleanse their hands with both soap and water or an alcohol-based hand cleaner every time they visit your room. Doctors and nurses come into contact with a lot of bacteria and viruses so before they treat you, ask them if they have washed their hands.

What is COVID-19?

It is a novel coronavirus, or a new coronavirus that has not been previously identified. The virus causing coronavirus disease 2019 (COVID-19), is not the same as the coronaviruses that commonly circulate among humans and cause mild illness, like the common cold. This new coronavirus causes more severe infections, that can become life-threatening.

How does the virus spread?

The virus that causes COVID-19 most commonly spreads between people who are in close contact with one another (within about 6 feet, or 2 arm lengths).

- It spreads through respiratory droplets or small particles, such as those in aerosols, produced when an infected person coughs, sneezes, sings, talks, or breathes.
 - These particles can be inhaled into the nose, mouth, airways, and lungs and cause infection. This is thought to be the main way the virus spreads.
 - Droplets can also land on surfaces and objects and be transferred by touch. A person may get COVID-19 by touching the surface or object that has the virus on it and then touching their own mouth, nose, or eyes. Spread from touching surfaces is not thought to be the main way the virus spreads.
- It is possible that COVID-19 may spread through the droplets and airborne particles that are formed when a person who has COVID-19 coughs, sneezes, sings, talks, or breathes. There is growing evidence that droplets and airborne particles can remain suspended in the air and be breathed in by others, and travel distances beyond 6 feet (for example, during choir practice, in restaurants, or in fitness classes). In general, indoor environments without good ventilation increase this risk.

How do I prevent the spread of this virus?

- Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- It's especially important to wash:
 - Before eating or preparing food
 - Before touching your face
 - After using the restroom
 - After leaving a public place
 - After blowing your nose, coughing, or sneezing
 - After handling your mask
 - After changing a diaper
 - After caring for someone sick
 - After touching animals or pets
- If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Cover your mouth and nose with a mask when around others
 - You could spread COVID-19 to others even if you do not feel sick.
 - The mask is meant to protect other people in case you are infected.
 - Everyone should wear a mask in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain.
 - Masks should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
 - Do NOT use a mask meant for a healthcare worker. Currently, surgical masks and N95 respirators are critical supplies that should be reserved for healthcare workers and other first responders.
 - Continue to keep about 6 feet between yourself and others. The mask is not a substitute for social distancing.

What should I do if I get sick or someone in my household gets sick?

Most people who get COVID-19 will be able to recover at home. CDC has directions for people who are recovering at home and their caregivers, including:

- Stay home when you are sick, except to get medical care.
- Use a separate room and bathroom for sick household members (if possible).
- Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
- Provide your sick household member with clean disposable facemasks to wear at home, if available, to help prevent spreading COVID-19 to others.
- Clean the sick room and bathroom, as needed, to avoid unnecessary contact with the sick person.

However, some people may need emergency medical attention. Watch for symptoms and learn when to seek emergency medical attention.

When to Seek Emergency Medical Attention?

Look for emergency warning signs* for COVID-19. If someone is showing any of these signs, seek emergency medical care immediately

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

Call 911 or call ahead to your local emergency facility: Notify the operator that you are seeking care for someone who has or may have COVID-19.

What should I do if I have had close contact with someone who has COVID-19?

- Stay home for 14 days after your last contact with a person who has COVID-19.
- Be alert for symptoms. Watch for fever, cough, shortness of breath, or other symptoms of COVID-19.
- If possible, stay away from others, especially people who are at higher risk for getting very sick from COVID-19.

FAQs (frequently asked questions) about “MRSA” (Methicillin-Resistant Staphylococcus aureus)

What is MRSA?

Staphylococcus aureus (pronounced staff-ill-oh-KOK-us AW-ree-us), or “Staph” is a very common germ that about 1 out of every 3 people have on their skin or in their nose. This germ does not cause any problems for most people who have it on their skin. But sometimes it can cause serious infections such as skin or wound infections, pneumonia, or infections of the blood. Antibiotics are given to kill Staph germs when they cause infections. Some Staph are resistant, meaning they cannot be killed by some antibiotics. “Methicillin-resistant Staphylococcus aureus” or “MRSA” is a type of Staph that is resistant to some of the antibiotics that are often used to treat Staph infections.

Who is most likely to get an MRSA infection?

People who are more likely to get a MRSA infection are those who:

- have other health conditions making them sick
- have been in the hospital or a nursing home
- have been treated with antibiotics.

People who are healthy and who have not been in the hospital or a nursing home can also get MRSA infections. These infections usually involve the skin. More information about this type of MRSA infection, known as “community-associated MRSA” infection, is available from the Centers for Disease Control and Prevention (CDC). <http://www.cdc.gov/mrsa>

How do I get an MRSA infection?

People who have MRSA germs on their skin or who are infected with MRSA may be able to spread the germ to other people. MRSA can be passed on to bed linens, bed rails, bathroom fixtures, and medical equipment. It can spread to other people on contaminated equipment and on the hands of doctors, nurses, other healthcare providers and visitors.

Can MRSA infections be treated?

Yes, there are antibiotics that can kill MRSA germs. Your health care provider will determine which treatments are best for you.

What are some of the things that hospitals are doing to prevent MRSA infections?

To prevent MRSA infections, doctors, nurses, and other health care providers:

- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for every patient.
- Carefully clean hospital rooms and medical equipment.
- Use Contact Precautions when caring for patients with MRSA. Contact Precautions mean:
 - o Whenever possible, patients with MRSA will have a single room or will share a room only with someone else who also has MRSA.
 - o Healthcare providers will put on gloves and wear a gown over their clothing while taking care of patients with MRSA.
 - o Visitors will also be asked to wear a gown and gloves.

- o Health care providers will put on gloves and wear a gown over their clothing while taking care of patients with MRSA.
- o Visitors will also be asked to wear a gown and gloves.
- o When leaving the room, healthcare providers and visitors remove their gown and gloves and clean their hands.
- o Patients on Contact Precautions are asked to stay in their hospital rooms as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They may go to other areas of the hospital for treatments and tests.

What can I do to help prevent MRSA infections?

- Make sure that all doctors, nurses, and other health care providers clean their hands with soap and water or an alcohol-based hand rub before and after caring for you. If you do not see your providers clean their hands, please ask them to do so.
- Be sure to clean your own hands often.

Can my friends and family get MRSA when they visit me?

The chance of getting MRSA while visiting a person who has MRSA is very low. To decrease the chance of getting MRSA your family and friends should:

- Clean their hands before they enter your room and when they leave.
- Wear protective gowns and gloves when they visit you.

What do I need to do when I go home from the hospital?

To prevent another MRSA infection and to prevent spreading MRSA to others:

- Keep taking any antibiotics prescribed by your doctor. Don't take half doses or stop before you complete your prescribed course.
- Clean your hands often, especially before and after changing your wound dressing or bandage.
- People who live with you should clean their hands often as well.
- Keep any wounds clean and change bandages as instructed until healed.
- Avoid sharing personal items such as towels or razors.
- Wash and dry your clothes and bed linens in the warmest temperatures recommended on the labels.
- Tell your health care providers that you have MRSA. This includes home health nurses and aides, therapists, and personnel in doctors' offices.
- Your doctor may have more instructions for you. If you have questions, please ask your doctor or nurse.

Where can I get more information about MDROs?

If you have any questions, speak with your doctor or nurse. You can also visit the following website for more information: Centers for Disease Control and Prevention www.cdc.gov

FAQs (frequently asked questions) about Multidrug Resistant Organisms (MDROs)

What is a multidrug resistant organism?

A multidrug resistant organism (MDRO) is a germ that is resistant to many antibiotics. If a germ is resistant to an antibiotic, it means that certain treatments will not work. MDROs can be difficult to treat, since there are fewer antibiotics that work to treat them.

Examples of MDROs include:

- Methicillin resistant Staphylococcus aureus (MRSA)
- Vancomycin resistant Enterococcus (VRE)
- Resistant Acinetobacter (CRAB)

These germs can cause a variety of illnesses, including:

- Urinary tract infections
- Pneumonia
- Blood infections
- Wound infections

Who is most likely to get an MDRO infection?

Healthy people are not at high risk for getting MDRO infections. Infections occur more often in people who:

- Are older
- Have weakened immune systems
- Have chronic illnesses
- Have been treated with antibiotics in the past
- Had a recent surgery
- Have had repeated or prolonged hospitalizations
- Have open wounds or sores
- Have tubes or drains in the body

What is the difference between being colonized and being infected with an MDRO?

A person can be either colonized or infected with an MDRO. If a person is colonized, it means that the germ is present on their skin or in a body opening, but they have no signs of illness. If a person is infected, it means that the germ is present on their skin or in a body opening and it is causing illness.

How are MDROs spread?

Most MDRO infections are spread by direct contact with an infected person's bodily fluids (blood, drainage from a wound, urine, stool, or sputum). They can also be spread by contact with equipment or surfaces that have been contaminated with the germ. Casual contact, such as touching or hugging, does not spread MDROs.

What are the symptoms of an MDRO infection?

The symptoms vary depending on the location and type of infection.

What are the symptoms of an MDRO infection?

The symptoms vary depending on the location and type of infection.

Can MDRO infections be treated?

Yes, there are antibiotics that can kill MDRO germs. Your health care provider will determine which treatments are best for you.

What are some of the things that hospitals are doing to prevent MDRO infections?

To prevent MDRO infections, doctors, nurses, and other health care providers:

- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for every patient.
- Carefully clean hospital rooms and medical equipment.
- Use Isolation Precautions when caring for patients with MDRO. **Isolation Precautions mean:**
 - o If you have been diagnosed with an MDRO infection, you will be placed in a single room or will share a room only with someone else who has the same MDRO.
 - o Health care providers will put on gloves and wear a gown over their clothing while taking care of patients with an MDRO. Sometimes a mask will also be required.
 - o Visitors will be asked to wear a gown and gloves (and mask at times).
 - o When leaving the room, hospital providers and visitors remove their gown and gloves and clean their hands.
 - o Patients on Isolation Precautions are asked to stay in their hospital rooms as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They can go to other areas of the hospital for treatments and tests.

What precautions should I take at home if I have an MDRO infection?

Healthy people are not at high risk for getting MDRO infections. However, be sure to do the following at home:

- Wash your hands frequently with soap and water, especially after using the bathroom.
- Wash your hands after having contact with blood, urine, or drainage from a wound.
- Keep any wounds clean and change bandages as instructed until healed.
- Avoid sharing personal items such as towels or razors.
- Wash and dry your clothes and bed linens in the warmest temperatures recommended on the labels.
- Use a disinfectant such as Clorox® or Lysol® to wipe any surface that may have been contaminated with the germ.

Where can I get more information about MDROs?

If you have any questions, speak with your doctor or nurse. You can also visit the following website for more information: Centers for Disease Control and Prevention www.cdc.gov

Source: cdc.gov

FAQs (frequently asked questions) about “Clostridium Difficile”

What is Clostridium difficile infection?

Clostridium difficile [pronounced Klo-STRID-ee-um dif-uh-SEEL], also known as “C. diff” [See-dif], is a germ that can cause diarrhea. Most cases of C. diff infection occur in patients taking antibiotics. The most common symptoms of a C. diff infection include:

- Watery diarrhea
- Fever
- Loss of appetite
- Nausea
- Belly pain and tenderness

Who is most likely to get C. diff infection?

The elderly and people with certain medical problems have the greatest chance of getting C. diff. C. diff spores can live outside the human body for a very long time and may be found on things in the environment such as bed linens, bed rails, bathroom fixtures, and medical equipment. C. diff infection can spread from person-to-person on contaminated equipment and on the hands of doctors, nurses, other health care providers and visitors.

Can C. diff infection be treated? Yes, there are antibiotics that can be used to treat C. diff. Your health care provider will determine which treatments are best for you.

What are some of the things that hospitals are doing to prevent C. diff infections?

To prevent C. diff. infections, doctors, nurses, and other healthcare providers:

- Wash their hands with soap and water before and after caring for every patient. This can prevent C. diff and other germs from being passed from one patient to another on their hands.
- Carefully clean hospital rooms and medical equipment that have been used for patients with C. diff.
- Use Strict Contact Precautions to prevent C. diff from spreading to other patients. Strict Contact Precautions mean:
 - o Whenever possible, patients with C. diff will have a single room or share a room only with someone else who also has C. diff.
 - o Health care providers will put on gloves and wear a gown over their clothing while taking care of patients with C. diff.
 - o Visitors will also be asked to wear a gown and gloves.
 - o When leaving the room, healthcare providers and visitors remove their gown and gloves and wash their hands with soap and water.
 - o Patients on Strict Contact Precautions are asked to stay in their hospital rooms as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They can go to other areas of the hospital for treatments and tests.

What can I do to help prevent C. diff infections?

- Make sure that all doctors, nurses, and other health care providers wash their hands with soap and water before and after caring for you. If you do not see your providers wash their hands, please ask them to do so.
- Only take antibiotics as prescribed by your doctor.
- Be sure to wash your own hands with soap and water often, especially after using the bathroom and before eating.

Can my friends and family get C. diff when they visit me?

Visitors are not likely to get C. diff. when certain precautions are followed. Visitors should:

- Wash their hands with soap and water before they enter your room and as they leave your room
- Wear protective gowns and gloves when they visit you.

What do I need to do when I go home from the hospital?

Once you are back at home, you can return to your normal routine. Often, the diarrhea will be better or completely gone before you go home. This makes giving C. diff to other people much less likely. There are a few things you should do, however, to lower the chances of developing C. diff infection again or of spreading it to others.

- If you are given a prescription to treat C. diff, take the medicine exactly as prescribed by your doctor and pharmacist. Do not take half-doses or stop before you run out.
- Wash your hands with soap and water often, especially after going to the bathroom and before preparing food.
- People who live with you should wash their hands with soap and water often as well.
- Wash soiled clothing in HOT water (using bleach if fabric compatible) and machine dry if possible.
- Clean frequently touched surfaces such as faucet handles, flush handles, door knobs, bed rails, etc. with a bleach based disinfectant.
- If you develop more diarrhea after you get home, tell your doctor immediately.
- Your doctor may give you additional instructions. If you have questions, please ask your doctor or nurse.

Where can I get more information about MDROs?

If you have any questions, speak with your doctor or nurse. You can also visit the following website for more information: Centers for Disease Control and Prevention www.cdc.gov

Source: cdc.gov

FAQS (FREQUENTLY ASKED QUESTIONS) ABOUT SURGICAL SITE INFECTIONS

What is a Surgical Site Infection (SSI)?

A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Most patients who have surgery do not develop an infection. However, infections develop in about 1 to 3 of every 100 patients who have surgery.

Some of the common symptoms of a surgical site infection are:

- Redness and pain around the area where you had surgery
- Drainage of cloudy fluid from your surgical wound
- Fever

Can SSIs be treated?

Yes. Most surgical site infections can be treated with antibiotics. The antibiotic given to you depends on the bacteria (germs) causing the infection. Sometimes patients with SSIs also need another surgery to treat the infection.

What are some of the things that hospitals are doing to prevent SSIs?

To prevent SSIs, doctors, nurses, and other healthcare providers:

- Clean their hands and arms up to their elbows with an antiseptic agent just before the surgery.
- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for each patient.
- May remove some of your hair immediately before your surgery using electric clippers if the hair is in the same area where the procedure will occur. They should not shave you with a razor.
- Wear special hair covers, masks, gowns, and gloves during surgery to keep the surgery area clean.
- Give you antibiotics before your surgery starts. In most cases, you should get antibiotics within 60 minutes before the surgery starts and the antibiotics should be stopped within 24 hours after surgery.
- Clean the skin at the site of your surgery with a special soap that kills germs.

FAQS (FREQUENTLY ASKED QUESTIONS) ABOUT SURGICAL SITE INFECTIONS

What can I do to help prevent SSIs?

Before your surgery:

- Tell your doctor about other medical problems you may have. Health problems such as allergies, diabetes, and obesity could affect your surgery and your treatment.
- Quit smoking. Patients who smoke get more infections. Talk to your doctor about how you can quit before your surgery.
- Do not shave near where you will have surgery. Shaving with a razor can irritate your skin and make it easier to develop an infection.

At the time of your surgery:

- Speak up if someone tries to shave you before surgery. Ask why you need to be shaved and talk with your surgeon if you have any concerns.
- Ask if you will get antibiotics before surgery.

After your surgery:

- Make sure that your health care providers clean their hands before examining you, either with soap and water or an alcohol-based hand rub.

If you do not see your providers clean their hands, please ask them to do so.

- Family and friends who visit you should not touch the surgical wound or dressings.
- Family and friends should clean their hands with soap and water or an alcohol-based hand rub before and after visiting you. If you do not see them clean their hands, ask them to clean their hands.

What do I need to do when I go home from the hospital?

- Before you go home, your doctor or nurse should explain everything you need to know about taking care of your wound. Make sure you understand how to care for your wound before you leave the hospital.
- Always clean your hands before and after caring for your wound.
- Before you go home, make sure you know who to contact if you have questions or problems after you get home.
- If you have any symptoms of an infection, such as redness and pain at the surgery site, drainage, or fever, call your doctor immediately.

If you have additional questions, please ask your doctor or nurse.

The Urinary Catheter Conversation Starts with YOU!

You Have an Important Role in Preventing Infection

What is a URINARY CATHETER?

It is a tube that is placed into the bladder to drain urine. The urinary catheter (often called a Foley) is left in place, and is connected to a drainage bag.

Urinary catheters should be placed only when needed and should be **removed as soon as possible** because they can be harmful.

Urinary catheters:

- can cause urinary infections, which could lead to a longer stay in the hospital and serious illness
- can be uncomfortable or painful
- may limit your movement in bed and in your room. Limited activity could make you weak
- may lead to falls because of tripping over the tubing

The risk of infection increases with each day the catheter is in place.

What are some of the RISKS of a urinary catheter?

Why WOULD I NEED a urinary catheter?

Reasons a urinary catheter may be used include:

- if you cannot pass urine on your own either because something is blocking the urine flow or your bladder does not empty as it should
- it is important to know exactly how much urine you are making
- during and shortly after some types of surgeries

When should I NOT RECEIVE a urinary catheter?

Urinary catheters should not be placed just because you cannot get out of bed, you are worried about falling or because you leak urine (meaning you are "incontinent" of urine). Talk to your healthcare team about safer measures that may be used instead.

You play an important part in preventing infection!

- Talk to your healthcare team everyday; ask for your urinary catheter to be removed as soon as possible.
- Make sure healthcare team members clean their hands before and after touching your urinary catheter. If you do not see them clean their hands, please ask them to do so.
- Do not tug, pull, twist or kink your urinary catheter tubing.
- Always clean your hands before and after touching your urinary catheter.
- Be aware of the position of the drainage bag; it should stay lower than your bladder (your bladder is below your belly button).
- Tell your healthcare team whenever your drainage bag is more than half full.

If I already have a urinary catheter, what can I do to HELP PREVENT INFECTION?

References:

- 1) Reproduced from Catheterout.org with permission http://catheterout.org/sites/webservices.itcs.umich.edu.drupal.Bladwder%20Bundle/files/Patient%20and%20family%20script_Final.pdf
- 2) FAQs about Catheter Associated Urinary Tract Infections (CAUTI), Shea et al. http://www.cdc.gov/hai/pdfs/uti/ca-uti_tagged.pdf
- 3) CDC reference http://www.cdc.gov/HAI/ca_uti/cauti_faqs.html

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Colorado Department
of Public Health
and Environment

ACTING QUICKLY CAN SAVE LIVES FROM SEPSIS



SEPSIS IS YOUR BODY'S LIFE-THREATENING RESPONSE TO AN INFECTION AND IS A MEDICAL EMERGENCY.

IF YOU DEVELOP A COMBINATION OF THESE SYMPTOMS*:

- S Shivering, fever, or very cold.
- E Extreme pain or general discomfort ("worst ever").
- P Pale or discolored skin.
- S Sleepy, difficult to rouse, confused.
- I "I feel like I might die."
- S Short of breath.



CALL 911

OR

**GO TO A HOSPITAL AND SAY
"I'M CONCERNED ABOUT SEPSIS"**

*Particularly if you recently had an open wound (cut, scrape, bug bite, etc.), surgery, some type of invasive procedure, or infection.

Get involved and join the fight at sepsis.org



SEPSIS ALLIANCE

Suspect Sepsis. Save Lives.

Made possible in part by an unrestricted educational grant from Merck and Co., Inc. Special thanks to the UK Sepsis Trust

BE STROKE AWARE



A stroke occurs when a blood vessel that carries oxygen and nutrients to the brain is either blocked or bursts. When that happens, part of the brain cannot get the blood

Every 40 Seconds

Someone in the US will have a stroke

795,000 Strokes Occur Every Year



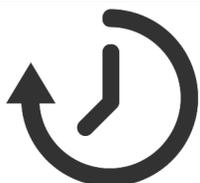
Stroke is the **5th Leading Cause** of Death in the United States

One American Dies

Every 4 Minutes from a stroke

Stroke kills **130,000** Americans Every Year

Stroke is the **1st Leading Cause** of Adult Disability



EVERY MINUTE COUNTS WITH STROKE. KNOW THE SIGNS AND IF YOU SEE ONE

B. E. F. A. S. T.



BALANCE

Loss of balance, coordination, headache or dizziness.



EYES

Blurred vision or loss of vision.



FACE

One side of the face is drooping and smile is uneven



ARMS

Arm or Leg weakness or numbness on one side



SPEECH

Slurred or strange speech or difficulty understanding



TIME

Call 911 for an ambulance immediately

Risk Factors for Stroke

What Risk Factors Can I Control, Treat or Improve?



HIGH BLOOD PRESSURE

Check your blood pressure regularly and aim for a blood pressure less than 120/80.

TOBACCO USE

Nicotine damages the cardiovascular system quadrupling the risk for stroke.

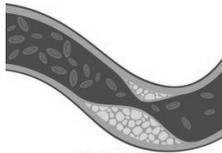


DIABETES MELLITUS

Talk with your provider about ways you can stabilize blood sugars.

ARTERY DISEASES

Fatty deposits in the artery walls can block normal blood flow to the brain.

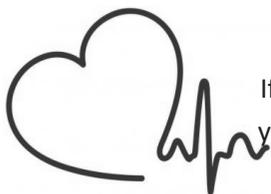


DIET & NUTRITION

Limit saturated fats, trans fats, cholesterol and sodium in your diet. Eat at least 5+ servings of fruits and vegetables per day.

PHYSICAL ACTIVITY

Aim for being active at least 150 minutes a week. Move more & sit less.



ATRIAL FIBRILLATION

If you know you have A-fib, talk to your provider about ways to lower your risk of developing a clot.

ILLEGAL DRUGS & ALCOHOL

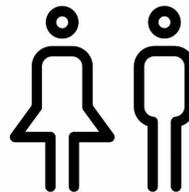
Limit alcohol to less than 1 drink a day for women and 2 drinks a day for men. Drug abuse carries a high risk for stroke.



What Risk Factors Can I Not Change?

AGE

The likelihood of having a stroke increases with age for both males and females., but people of all ages can have a stroke.

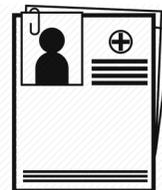


GENDER

Women have more strokes than men and stroke kills more women than men.

RACE

African-Americans have a much higher risk for stroke than Caucasians. Hispanics and Latinos also have unique risks for stroke.



FAMILY HISTORY

If your parent, grandparent, brother or sister has had a stroke you may be at greater risk.

KNOW YOUR NUMBERS

Cholesterol should be checked every year is you are at high risk for stroke & heart disease or every 4-6 years if you are low risk.

Blood Pressure should be checked every year if <120/80 and as directed by your provider if >120/80.

Blood Sugars should be checked every 1-2 years if not diabetic and as directed by your provider if diabetic.

Plan to participate in our EDUCATIONAL OPPORTUNITIES.
Learn more at www.parkviewmc.com/events

COMMUNITY EDUCATION

Go to www.parkviewmc.com to learn when the next group meets.

SUPPORT GROUPS:

STROKE SURVIVORS

Stroke Survivors is dedicated to helping, educating and supporting stroke survivors and their caregivers and to provide information to the general public on stroke and aphasia (unable to speak or understand). Call 584.4995

STROKE MANAGEMENT & PREVENTION

Class offers valuable information for both stroke survivors and their caregivers. Learn about...

Personal risk factors & how to prevent a stroke

- Nutrition & exercising after a stroke
- What a stroke looks like & what to do if you see one
- Community resources & stroke support group

Call 584.4047

PARKINSON'S

This group is open to those affected by Parkinson's along with their care partners, with the purpose of sharing information and offering mutual support in a spirit of self-acceptance. It is a place where family members and friends can feel welcome and supported and receive additional education on Parkinson's-related topics. Call 584.4677

BRAIN INJURY

Community sponsored - for survivors & family members. Call 719.387.7093

BRAIN INJURY CAREGIVER

Community sponsored - for survivors & caregivers, along with family members and friends. Call 719.387.7093

OSTOMY

Group is open to ALL patients, family members, caregivers and friends interested in joining us in the sharing of ostomy information and experiences as we care for our loved ones. Call 584.7300

DIABETES

Call 584.7320

STOP THE BLEED

This course will provide knowledge and education on how to stop bleeding in the event of an emergency, accident, or mass casualty. To set up a class for your group or business, call 595.7183.

STEPPING ON - FALL PREVENTION

Call 595.7183 to learn more about our FREE 7-week course, providing education to prevent falls at home and raise awareness regarding safety.

DIABETES EDUCATION DIABETES SELF-MANAGEMENT

Classes are offered on various days and times. Provider referral required. This is a recognized program and billable through health insurance.

For a free diabetes screenings, call 584.7320.

PARKVIEW MOBILE NURSES' EVENTS 584.7319

Join the plant based certified Parkview Mobile Nurses, exploring how changing your food can change your health, through their free events: Lunch & Learns, Grocery Store Tours and documentary previews.

BLOOD PRESSURE CHECKS

Why get your blood pressure checked? Along with education about prevention of heart disease, regular blood pressure checks can detect abnormal numbers. These participants are encouraged to follow up with their primary care provider. Free regular monthly checks are scheduled.

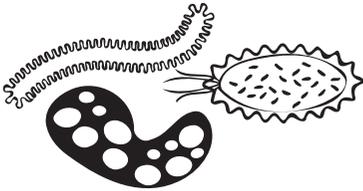
HEALTH SCREENINGS

The Mobile Nurses offer comprehensive health screenings and health education services - including blood pressure, blood glucose & BMI. **Interested businesses, call 719.584.7319 to set up a health screening.**

COMMON MEDICATION SIDE EFFECTS

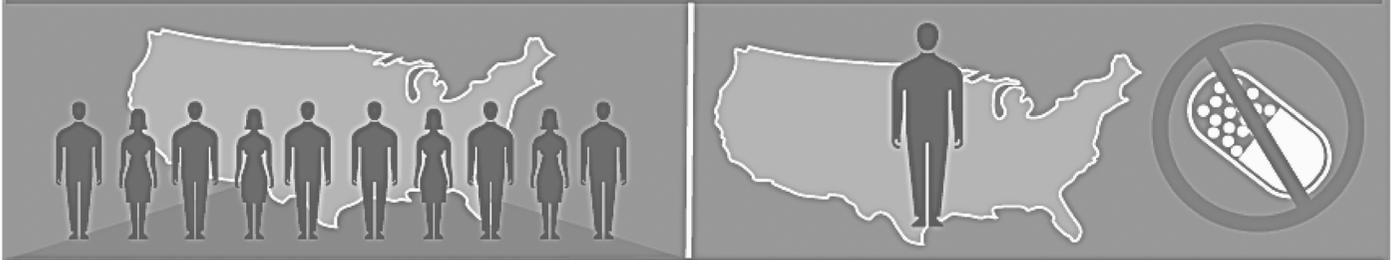
This sheet provides side effect information about medications that may have been initiated during your hospital stay. Your nurse will identify any that are specific to you. If you have any questions or concerns please ask your nurse or pharmacist.

What is my medication? Medication: Brand (Generic)	Why am I taking it? This medication is for:	What are the common side effects?
Narcotics: Morphine Dilaudid (Hydromorphone) Fentanyl Vicodin, Lortab (Hydrocodone/ Acetaminophen) Percocet (Oxycodone/Acetaminophen) Oxycodone Epidurals PCAs Other _____	Pain 	Dizziness Drowsiness Itching Constipation Nausea/Stomach upset
Non-Narcotics: Advil, Motrin (Ibuprofen) Toradol (Ketorolac) Aleve (Naproxen) Tylenol (Acetaminophen) Other _____	Mild Pain or Decreasing Inflammation 	Risk of Bleeding GI Upset Rash
Antiemetics: Zofran (Ondansetron) Compazine (Prochlorperazine) Reglan (Metoclopramide) Phenergan (Promethazine) Other _____	Nausea or Vomiting 	Headache Weakness Dizziness Drowsiness Constipation Restlessness (Reglan)
GI Medications: Prilosec (Omeprazole) Protonix (Pantoprazole) Pepcid (Famotidine) Other _____	Heartburn or Reflux 	Headache Diarrhea Abdominal pain
Anticoagulants: Coumadin (Warfarin) Lovenox (Enoxaparin) Heparin Eliquis (Apixaban) Xarelto (Rivaroxaban) Aspirin Other _____	Preventing or Treating Blood Clots 	Risk for Bleeding Bruising Abdominal pain (Warfarin) Fever (Enoxaparin) Nausea (Enoxaparin)

What is my medication? Medication: Brand (Generic)	Why am I taking it? This medication is for:	What are the common side effects?
Corticosteroids: Solumedrol (Methylprednisolone) Decadron (Dexamethasone) Deltasone (Prednisone) Other _____	Decreasing Inflammation 	GI upset Increased appetite
Antibiotics: Amoxil (Amoxicillin) Ancef, Kefzol (Cefazolin) Clindamycin Levofloxacin Zosyn (Piperacillin/Tazobactam) Vancocin (Vancomycin) Other _____	Treating Bacterial Infection(s) 	GI upset Rash Itching Diarrhea Headache
Benzodiazepines: Lorazepam (Ativan) Alprazolam (Xanax) Diazepam (Valium) Other _____	Anxiety 	Sleepy/Light headed Confusion Blurred vision
Statins: Lipitor (Atorvastatin) Zocor (Simvastatin) Pravachol (Pravastatin) Other _____	Decreasing Cholesterol 	Headache Nausea Diarrhea [Muscle pain or weakness - call medical provider]
Beta Blockers: Tenormin (Atenolol) Coreg (Carvedilol) Toprol XL, Lopressor (Metoprolol) Other _____	Heart Failure; Decreasing Blood Pressure and Heart Rate 	Dizziness Drowsiness Fatigue
ACE Inhibitors or ARBs: Zestril, Prinivil (Lisinopril) Diovan (Valsartan) Other _____	Decreasing Blood Pressure; Heart Failure 	Dizziness Dry cough Headache
Sleep Aids: Ambien (Zolpidem) Other _____	Insomnia 	Drowsiness/Dizziness Headache
Other:		

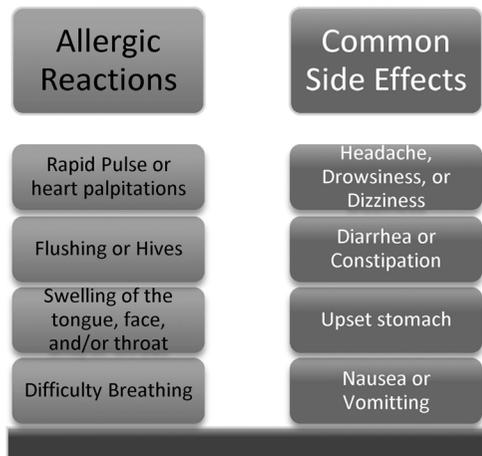
What is a true Penicillin Allergy?

10% of the population reports a penicillin allergy but <1% of the whole population is truly allergic.



An **allergic reaction** happens when your body reacts to a foreign substance by activating your immune system to get rid of it. Some allergic reactions can be immediate while others can take hours to develop.

An allergy is different than a **side effect** which is an unintended or unwanted effect caused by a drug. Side effects are not usually life threatening. Differences in signs and symptoms are:



Some side effects can be lessened with food and may decrease over time. Speak with your health care provider and pharmacist if you have any questions about side effects and allergies to medications, especially when starting a new medication!

About 80% of patients with true penicillin allergies lose their sensitivity after 10 years.

It is important to correctly report your drug allergies to all your health care providers so that drugs that may cause a reaction can be avoided and so your provider can prescribe the best medication for your condition.

What to tell your health care provider:

- What happens when you take the medication?
- When did you have the reaction?
- What other antibiotics have you taken and not had a reaction to?
- Have you ever had a reaction called Stevens-Johnson Syndrome (SJS) or Toxic Epidermal Necrolysis (TEN)?

Centers for Disease Control and Prevention [Internet]. Is it Really a Penicillin Allergy? [Cited 2017 Nov 16]. Available from: <https://www.cdc.gov/antibiotic-use/community/pdfs/penicillin-factsheet.pdf>

PREVENTING AND TREATING PRESSURE INJURIES

What is a pressure injury?

Also called bed sores, pressure injuries are injuries to the skin and to deeper layers usually caused when the skin is under pressure. This can happen when skin is 'pressed' between a bone inside the body and an outside surface such as a bed or chair. If the pressure is prolonged it harms the skin. The pressure cuts off the blood supply; this harms cells. You can see this as a red or warm area that may become a scab or wound.

A pressure injury often begins as a tender, red or warm spot that doesn't go away, and can become quite painful. They usually occur on skin areas one sits or lies on, or on the heels. Often, they are a different or darker color than normal skin. They can become infected, and present a serious problem. Pressure injuries often occur when a person is ill or unable to move easily.

Pressure Injury Prevention

- Change position often in bed and at least three times each hour when sitting.
- Avoid sliding or dragging in and out of the chair or bed.
- Keep the skin clean, dry and healthy.
- Use barrier ointment to protect skin from urine or other body waste.
- Use cream or lotion to protect dry skin.
- Inspect and protect fragile skin every day.
- Be sure to eat a healthy, balanced diet and drink enough fluids.
- KEEP MOVING. Shift your weight, walk, sit up and stand up. Move as much as you can safely and comfortably.

Pressure Injury Treatment

- Change position often in bed and at least three times each hour when sitting.
- Avoid lying or sitting on the wound.
- An important step to healing is to remove pressure on all bony areas.
- Do not massage or rub any red, warm or tender area.
- Do not massage any pressure injury.
- Make the most of good nutrition with a healthy, balanced diet. An increase in protein or other nutrients may be needed to promote healing.
- Keep the skin clean, dry and healthy.
- Moisturize and protect dry skin with barrier cream or ointment.
- Inspect and protect fragile skin every day.
- Don't forget that drinking plenty of fluid is very important for healing.
- Avoid sliding or dragging in and out of the chair or bed.
- KEEP MOVING by shifting your weight, waling, sitting up, standing up, and moving as much as you can safely and comfortably.
- Follow your health care team's instructions for wound care plus what dressing or bandage you should use for your pressure injury.
- Report any problems or changes to your health care team as soon as possible.

For care regarding pressure injuries after leaving the hospital, please contact the Wound Center at 719.584.7300.

Source: Association for Advancement of Wound Care (AAWC) - information provided through the volunteer support and clinical expertise of the AAWC Public Awareness Task Force.

WHAT IS A HEART ATTACK?

Your heart muscle needs oxygen to survive. Heart attacks occur when the blood flow that brings oxygen to the heart muscle is severely reduced or cut off completely. This happens because coronary arteries that supply the heart muscle with blood flow can slowly become narrow from a buildup of fat, cholesterol, and other substances that together are called plaque. This slow process is known as atherosclerosis. When plaque in a heart artery breaks, a blood clot forms around the plaque. This blood clot can block the blood flow through the heart muscle. When the heart muscle is starved for oxygen and nutrients, it is called ischemia. When damage or death of part of the heart muscle occurs as a result of ischemia, it is called a heart attack or myocardial infarction (MI). About every 43 seconds, someone in the United States has a myocardial infarction (heart attack).

Medical Terms for Heart Attack

STEMI – A common name for ST-elevation myocardial infarction, type of heart attack caused by a complete blockage in a coronary artery.

NSTEMI – A non ST-elevated myocardial infarction, type of heart attack in which an artery is partially blocked and severely reducing blood flow.

Myocardial infarction – The damaging or death of an area of the heart muscle (myocardium) resulting from a blocked blood supply to that area; medical term for a heart attack.

Heart Healthy Diet

Include: Fruits and vegetables, whole grains, beans and legumes, nuts and seeds, fish (preferably oily fish high in omega -3 fatty acids), skinless poultry, and plant-based alternatives. Fat-free and low-fat dairy products, and healthier fats and non-tropical oils.

Limit: Sodium and salt, saturated fat, sweets and added sugars, including sugar-sweetened beverages, and red meats (if you choose to eat red meat, select lean cuts).

Avoid: Trans-fat and partially hydrogenated oils (can include fried foods, baked goods, etc).

Tips: Choose wisely, even with healthier foods.

- Compare nutrition information on package labels and select products with lowest amount of sodium, added sugars, and saturated fat and trans-fat.
- Watch your calorie intake.
- Eat reasonable portions.
- Eat a wide variety of foods.
- Prepare and eat healthier meals at home.
- Look for the heart-check mark to easily identify foods that can be part of an overall healthy diet.

Exercise Recommendations

- At least 30 minutes of moderate-intensity aerobic activity at least 5 days per week for a total of 150 minutes.

OR

- At least 25 minutes of vigorous aerobic activity at least 3 days per week for a total of 75 minutes; or a combination of moderate and vigorous-intensity aerobic activity.

AND

- Moderate to high-intensity muscle strengthening activity at least 2 days per week for additional health benefits.

HEART FAILURE INSTRUCTIONS

Heart Failure (HF) causes shortness of breath, weakness, rapid water weight gain, swelling of feet and ankles, dizziness, trouble concentrating and rapid heart rate due to a weakened heart muscle that does not pump well. If you have been diagnosed with this condition or have a history of heart failure, this is what you can do:

1. Take your medications as prescribed by your doctor.

These medications will help make your heart pump stronger or relieve symptoms.

ACE/ARB MEDICATIONS: decrease your blood pressure and decrease strain on your heart muscle.

BETA BLOCKERS: lower your heart rate and blood pressure which reduces the work your heart must do and may improve the pumping action of the heart muscle over time.

DIURETICS: rid the body of excess water that can cause swelling. Some diuretics require potassium replacement therapy.

DIGOXIN: strengthens the heart contraction improving the pump.

OTHER MEDICATIONS often used include antihypertensives, cholesterol lowering agents, anticoagulants and antiarrhythmics.

Good Medicine Habits:

- Follow a routine for taking your medications
- Get a pill box that is marked for each day of the week and fill the box at the beginning of each week
- Refill your prescriptions before they run out
- Keep a list of your medications including the name, dose and times that you take them and bring this list to every office visit
- Take medications with you when you travel

2. Control Your Diet

EAT LESS SALT:

- Avoid adding salt to your food
- Avoid canned vegetables, soups and meats
- Avoid salted snack foods such as crackers and popcorn
- Read labels and use other non-salt spices in cooking

LIMIT FLUIDS to reduce swelling:

- Drink chilled fluid to quench thirst
- Rinse your mouth but do not swallow
- Chew gum
- Measure the fluids and drink only amount allowed

3. WATCH YOUR WEIGHT

Rapid weight gain indicates water retention and may require a change in your therapy.

- Weigh yourself on the same scale every morning
- Write down your daily weight
- Call your doctor if you gain 2 pounds in 1 day or if you gain 5 pounds in 1 week

4. Exercise

Your heart will work better if you exercise.

- Take a walk every day
- Pace yourself
- Try other activities like swimming or using a treadmill

5. Keep a Diary of Symptoms & Medications

Keep track of your symptoms in a diary. Take a diary and a list of your medications with you to the doctor.

- Chest pains
- Difficulty breathing
- Weight gain
- Swelling of feet and ankles or abdomen
- Increased fatigue and/or decreased activity tolerance
- Dizzy spells or fainting

6. Change in Symptoms

If you notice any change in your symptoms (you feel worse, have chest pain, have increased shortness of breath) or you have an increase in weight gain, notify your doctor AS SOON AS POSSIBLE.

7. Regular Checkups and Follow-Up Visits

Before you are discharged, be sure that a heart failure follow-up visit with your physician or cardiologist has been scheduled and that the appointment is within seven days of leaving the hospital.

HEART FAILURE Action Plan

Name _____

Provider _____ Phone _____

EVERY DAY

Every Day

- Take your medications as directed by your provider
- Weigh yourself first thing every morning, add it to your weight log
- Eat a low salt diet, read the labels on your foods for sodium content
- Gradually increase your activity, rest as often as you need
- Check for swelling in your feet, ankles, legs or abdomen
- Enjoy your family and friends, just don't overdo it

American Heart Association
Healthier Living With Heart Failure
ahaheartfailure.ksw-gtg.com

ALL CLEAR

Green Light: All Clear

- No weight gain
- No swelling in your feet, ankles, legs or abdomen
- No shortness of breath or trouble breathing
- No chest pain
- *Activity:* Plan time EVERY DAY for walking or other activity, unless your provider has given other instructions
- Your heart failure symptoms are controlled

Action Plan

- Continue to take all medications as directed
- Continue to weight yourself every day
- Eat a LOW SALT and SODIUM DIET
- Keep the appointments listed on the discharge form given to you
- If you smoke or chew tobacco, you must quit (Ask your provider or nurse for help)

CAUTION

Yellow Light: Caution

- Weight gain of three pounds overnight or five pounds in a week
- Swollen feet, ankles, legs or abdomen
- A decrease in how often or how much you urinate
- Shortness of breath or trouble breathing
- Trouble sleeping or the need to sleep propped up on pillows
- Frequent cough, especially while lying down
- Extreme fatigue or constant feeling of tiredness

Action Plan

- Call your provider if you have any of the symptoms listed
- Your provider may need to adjust your medications

MEDICAL ALERT!

Red Light: Medical Alert

- You need immediate assistance if you have any of these symptoms!
- Weight gain or loss of more than five pounds within a week
- Severe swelling in feet, ankles, legs or abdomen
- Unrelieved shortness of breath or severe breathing trouble
- Unrelieved chest pain
- Need to sleep sitting straight up

Action Plan

- You need to see a doctor immediately!
- Call 911 if you cannot reach your provider.

SURVIVE. DON'T DRIVE. CALL 9-1-1

Take the Pledge

**Know the Early Heart Attack
SIGNS & SYMPTOMS**

I understand that heart attacks have beginnings that may include:

- chest pressure, squeezing or discomfort
- shortness of breath
- pain traveling down one or both arms
- back pain
- fatigue
- feeling of fullness
- anxiety
- jaw pain
- nausea

These signs may occur hours or weeks before the actual heart attack. I solemnly swear that if it happens to me or anyone I know, I will call 9-1-1 .

Help Parkview build awareness about heart attacks - help save a heart!

Go to www.parkviewmc.com/ehac to take the pledge and show your support.

Pueblo's ONLY Accredited Chest Pain & Heart Attack Receiving Center



HANDS-ONLY CPR

Cardiac arrest occurs when the heart stops and can no longer pump blood to the brain or vital organs. Nearly 38 people an hour suffer a cardiac arrest at home, work, or even church – that is 420,000 people this year alone! Only 1 in 10 cardiac arrest victims survives.

Hands-Only CPR can save lives.

Most people who experience cardiac arrest at home, work or in a public location die because they don't receive immediate CPR from someone on the scene. As a bystander, don't be afraid. Your actions can only help.

When calling 911, you will be asked for your location. Be specific, especially if you're calling from a mobile phone as that is not associated with a fixed address. Answering the dispatcher's questions will not delay the arrival of help.

How to give Hands-Only CPR.

If you see a teen or adult suddenly collapse, call 9-1-1 and push hard and fast in the center of the chest to the beat of the classic disco song "Stayin' Alive" (uninterrupted chest compressions of 100 to 120 a minute). CPR can more than double a person's chances of survival, and "Stayin' Alive" has the right beat for Hands-Only CPR.

TOBACCO CESSATION INSTRUCTIONS

Tobacco use remains the leading preventable cause of death and the single greatest driver of health care costs in Colorado. About 5,100 Coloradoans die every year from tobacco-related illnesses according to the Colorado Department of Public Health & Environment.

Reasons to quit tobacco use:

- The average tobacco user who buys one pack of cigarettes or one can of chewing tobacco per day can save over \$110 per month or \$1,346 over a year.
- Smoking and secondhand smoke are strong triggers for an asthma attack. There is no risk-free level of second hand smoke exposure (CDC).
- Immediate benefits – sense of smell and taste returns, peripheral circulation improves, heart rate and blood pressure normalize
- At one year tobacco-free – fatigue, shortness of breath, coughing, sinus congestion are all reduced and lungs begin to heal themselves
- At five years tobacco-free – stroke risk is similar to non-smokers
- At 10 years – lung cancer risk, coronary heart disease risk are both similar to non-smokers

Preparing a Plan

Tobacco abuse is a chronic, addictive disease. Most people make many attempts to quit before they are successful. Making a plan helps improve your chances of quitting.

1. Reduce tobacco use prior to quitting

Keep a diary (a piece of paper wrapped around your tobacco) and track the date/time of each use. Also note how you were feeling, what you were doing, and how important each one was to you. Read this list every time you reach for tobacco. Start eliminating those “unimportant” moments of tobacco use.

2. Prepare to deal with triggers

Identify when you use tobacco and avoid those avoidable situations. Instead of using tobacco, what will you do: at work, at home, after a meal, in the car, during stressful times, watching TV, at a bar, with your friends, when you are lonely, etc.?

3. Dealing with cravings: follow the five D’s

Delay five minutes – most urges pass quickly, **D**rink water, **D**eep breaths, **D**iscuss craving with somebody, **D**istract yourself with an activity

4. Alternatives to triggers and cravings

Exercise – walk, jog, stairs, bike ride, sit-ups, push-ups, stretching

Activities – in tobacco-free zones like movies, museums, parks, stores, zoos, gyms

Substitutes – drink water or tea, sugarless gum, eat raw fruit or vegetables, brush your teeth

Five-minute diversions – crosswords puzzles, mini-exercise, oral substitutes, play with pet, listen to a song, text a friend, take a picture, check the weather outside, look at your plan, start a load of laundry, read the paper, walk to the mailbox

Withdrawal Symptoms

Withdrawal symptoms peak after three days and decrease slowly over the next month. These symptoms may include: trouble sleeping, irritability, frustration, anger, trouble concentrating, restlessness, feeling hungry, sadness. While withdrawal symptoms are short-lived, cravings may persist for months after quitting. There are some medications that help lessen withdrawal symptoms and cravings to help you quit.

Medications to Assist in Tobacco Cessation

Nicotine Replacement Therapy – the goal of nicotine replacement therapy is to slowly wean off tobacco products and reduce withdrawal symptoms to aid in tobacco abstinence. Your chance of becoming addicted to NRT is much lower as compared to cigarettes.

Medications cannot do all the work alone, but in combination with a plan, they can give you the best chance at quitting tobacco use. Ask your doctor, dentist, or pharmacist if these medications are right for you.

E-cigarettes are NOT a safe alternative to replace tobacco. These devices are not approved by the FDA as cessation medications because there is no standardization in the chemicals they might contain. Studies have shown some e-cigarettes to contain chemicals that are carcinogens and toxins. The safest thing to do is to quit nicotine altogether by using the following aids.

Over-the-Counter Aids

Nicotine patch (Nicoderm)

- The patch delivers a long-acting, slow-release nicotine delivery over 24 hours, reducing symptoms of withdrawal.
- Follow the directions on the box, starting with a higher dose patch and after a period of weeks, switch to lower strength patches. Some patients remain on lowest dose patch for longer periods of time (months) before they are able to abstain from tobacco use.
- Common side effects: insomnia and vivid dreams (these can be minimized by removing the patch at bedtime).

Nicotine gum (Nicorette)

- The gum contains nicotine that is released when chewed, delivering short-acting nicotine to reduce sudden cravings.
- This special gum should not be chewed like normal gum. A “chew-and-park” method is essential to absorb the nicotine and prevent side effects. Chew the gum until nicotine is tasted or tingling sensation, then park gum against cheek until the taste is gone. Repeat for up to 30 minutes.
- Common side effects: nausea, vomiting, heartburn, hiccups, headache, mouth irritation (these can be minimized by the chew-and-park method).

Nicotine lozenge (Nicorette)

- The lozenge releases short-acting bursts of nicotine to reduce sudden cravings.
- The lozenge should be placed in mouth against cheek, allowing it to dissolve over 30 minutes. Do not bite, chew or swallow whole.
- Common side effects: nausea, vomiting, heartburn, hiccups, headache, mouth irritation (these can be minimized by not chewing the lozenge).

Prescription-only Therapy (See your doctor for a prescription.)

Bupropion (Zyban, Wellbutrin SR)

- This is a drug that acts on the central nervous system, reducing the urge to use tobacco.
- Common side effects: insomnia, dry mouth, headache, agitation

Varenicline (Chantix)

- This drug acts on nicotine receptors, partially stimulating them and partially blocking them. This reduces nicotine withdrawal and the effects of nicotine if tobacco is used at the same time.
- Plan quit date for day seven of therapy, when drug reaches appropriate concentrations in the body to reduce cravings
- Common side effects: nausea, vomiting, headache, insomnia, vivid dreams

Nicotine inhaler (Nicotrol)

- This consists of a plastic inhaler and cartridges containing nicotine. When inhaled, the nicotine vapor is absorbed through tissues in the mouth not lungs for short-acting relief.
- May not be for every patient as the inhaler mimics holding a cigarette
- Common side effects: cough, irritation of mouth/throat

Nicotine nasal spray (Nicotrol NS)

- The nasal spray provides that fastest relief from cravings, delivering short-acting nicotine.
- Since it has a quick on-off effect, the spray may be used multiple times every hour.
- Common side effects: nasal burning/irritation, sneezing, tearing

SMART Steps to tobacco cessation:

Set a quit date – realize after three days of abstinence, all the nicotine is gone from your system

Make a plan – recognize the patterns around your tobacco use and plan alternative activities

Announce your plan to family and friends – enlist their support

Remove tobacco products from your home, vehicle, and workplace

Talk to your doctor about getting help to quit

Resources to help you quit:

- Colorado QuitLine 1.800.QUIT.NOW (1.800.784.8669)
- Get free, one-on-one support, plus a free supply of the patch
- My Quit Path www.MyQuitPath.org
- Smokefree.org offers links to texting and phone apps

RECEIVING BLOOD/BLOOD PRODUCTS

Your doctor has decided that you need to receive a transfusion of blood or blood products. This information sheet will help you understand what receiving blood or blood products means for you.

BENEFITS of Receiving Blood/Blood Products:

- Increases the red blood cells that carry oxygen in your blood. Oxygen is critical to normal body function.
- Replaces factors or cells in your blood that help stop or prevent bleeding.
- Replaces blood that is lost because of injury, your medical condition, or a treatment/procedure.
- There may be other benefits of receiving blood/blood products that your doctor can explain to you.

ALTERNATIVES to Receiving Blood:

- You may be able to receive your own blood back that is lost during surgery.
- There may be a medication (e.g. iron) that you can take instead of receiving blood.

TYPES of Blood Products:

- RED BLOOD CELLS are given to maintain the oxygen-carrying ability of the blood.
- PLATELETS are given to help stop or prevent bleeding.
- PLASMA and PLASMA PRODUCTS are given to help stop or prevent bleeding.

HOW Blood is Given:

- It is dripped into a vein through IV tubing.
- A unit (bag) of red blood cells takes about 2-4 hours to be given.
- Platelets and plasma products can be given more quickly.

RISKS of Receiving Blood:

- Many people are worried about getting a disease from blood. You should know that blood manufacturers carefully screen blood donors and routinely run tests to check for many diseases. As a result, the risk of getting a disease from blood is very rare.
- Your caregivers do many safety checks to make sure you are getting the right blood for you. However, there is still a chance of a reaction to transfused blood or blood products. Please tell your caregivers immediately if you experience any of the following symptoms:
 - Your skin becomes red and flushed, or begins to itch.
 - You suddenly start coughing, feel out of breath, or start wheezing.
 - You suddenly feel very anxious.
 - You feel your heart beating very fast.
 - You have a new headache.
 - Your lower back begins to hurt.
 - You suddenly start shaking, having chills, or a fever.
 - You begin vomiting or having diarrhea

YOUR RIGHTS:

- You have the right to refuse blood.
- You will need to sign a consent form if you choose to have blood.
- You have the right to ask questions and discuss your concerns.

FOLLOW-UP SURVEY

You will Receive a Phone Call or Email Once You Arrive Home

Sometimes patients have questions after receiving care, and that's why we contact you after you leave. We want to make sure your experience with us met your expectations.

About the Call or Email

Within the next week, you will receive an email or a telephone call that we ask you answer. The call will come from phone number 719.562.2090. The call is only about two minutes and is an outreach from our hospital to ensure you are satisfied with the care you received from us. The email will take, on average, less than two minutes to complete and is compatible with mobile and hand-held devices.

We're Here to Listen

If you have new questions or concerns once home, we're here to listen, and we want to know how you are doing after you leave Parkview Medical Center. Addressing any needs or questions once you arrive home is important to us as a part of your partnering with us for your care.

We are
building a
new app!



With this new app, **Parkview Connect**, health is always at the fingertips. The app will help manage all your health care needs.

Time-saving features include:

- Make appointments and receive reminders.
- Renew and refill prescriptions.
- View lab and test results.
- Message provider.
- View medications, immunizations, allergies, and medical history.
- Easy account sharing.
- And much more...

**PARKVIEW
CONNECT**
app available
March 5th

CASE MANAGEMENT/DISCHARGE PLANNING

Staffed by RN Case Managers, Social Work and Case Managers, we work with you, your doctor and care team to create a discharge plan to meet your specific after-hospital needs.

Working with your doctor, we:

- Assess you, as well as your family's needs, and assist in identifying discharge planning options.
- Assist in the coordination of your medical and surgical care, as appropriate, while you are in the hospital.
- Communicate with your insurance company to obtain benefits for hospital and after-hospital care you and your family may need.
- Assist with after-hospital care needs such as medical equipment for home and services such as home health services.
- Coordinate short-term skilled, acute rehab, long-term care and assisted living arrangements.
- Collaborate and direct report suspected abuse and/or neglect, as this is mandatory by the state of all health care providers.
- Provide resources when necessary to help the family or support person determine a patient's needs with regard to protective services (for example, guardianship or advocacy services, conservatorship, or child or adult protective services).
- Provide assistance when necessary in identifying a surrogate decision-maker to help with decisions about a patient's care, treatment and services when the patient is unable to make their own medical decisions.

During Your Hospital Stay

Together with you, your family, or whomever you choose, the case managers will discuss coordinating care to assist in your return to the community. It is important that you and your family and/or designated caregiver are involved in the discharge planning process as you are partners with the doctor and the rest of your care team in making decisions about your in-hospital and after-hospital care plan. Every weekday, care rounds take place on each unit during which the case management/discharge planning team reviews your individual discharge plan and any after hospital needs. Please communicate requests or preferences with your nurse, doctor or case manager.

Going Home

When you are ready to leave the hospital, your physician will enter a discharge order in your record. Discharge instructions will be reviewed with you, by a nurse, prior to discharge. If special arrangements for after-hospital care, such as a specialty hospital, nursing facility or homecare, are required or requested by your physician, case managers are available to assist you with coordination of services.

When your Parkview care team decides that it is appropriate for you to be discharged, your health and safety remains our number one priority. As a result, there may be some delay between when you are informed that you will be discharged and when you can actually depart. During this time your medical team will be running final tests, scheduling follow-up visits, arranging for home oxygen or equipment (if needed), reconciling your medications, arranging for placement or home care (if required) and coordinating for transportation. While we understand you may be anxious to be released, please bear with us during this time so that your transition will be as smooth and safe as possible. As always, if you have any questions or concerns during the discharge process, please ask your nurse.

During your hospital stay, your doctor may order services from other health care providers when planning care after hospitalization. You have a choice for your health care and we suggest you evaluate your options: medicare.gov, medicare.gov/nursinghomecompare, medicare.gov/homehealthcompare or medicare.gov/hospicecompare offers information about quality ratings of home care agencies, skilled nursing facilities, and hospice. Our case

management team can help set up services or arrange placements. Parkview has a financial interest in the following services: Parkview Adult/Geriatric Psychiatric Inpatient Unit, Inpatient Rehabilitation, Outpatient Rehab (YMCA & ParkWest Campus), Coumadin Clinic, Cardiac Rehab, Homecare, Diagnostic Imaging, Imaging Centers, Diabetes Care Center, Wound Center, Sleep Center and Ancillary.

How to Contact Us

There is a case manager on each floor of the hospital. You may request a discharge planning evaluation with a case manager by letting your nurse or doctor know. You may also call 719.584.4397. Leave a message and your call will be returned.

PAIN AFTERCARE INSTRUCTIONS

What You Should Know

Pain is your body's way of reacting to injury or illness. Good pain control is important. Pain can affect your appetite (ability or desire to eat), how well you sleep, your energy, and your ability to do things. Pain can also affect your mood and relationships with others. If your pain is controlled, you will suffer less and can even heal faster.

How You Can Manage Your Pain

Always take your pain medicine as ordered by your doctor. Keep a written list of your medicines and why you take them. Bring the list of medications when you see your doctor or come to the hospital.

Notify your doctor of the following:

- If you are not getting adequate pain relief after taking your medicine(s) or doing the treatment(s) that your doctor has ordered.
- Side effects such as nausea (upset stomach), vomiting(throwing up), constipation (hard bowel movement), itching, or a rash
- Of you seem to be very drowsy and sleepy

If taking pain medicine that makes you feel dizzy/drowsy, do not drive or use heavy equipment.

Do not drink alcohol while taking narcotic pain medication. Some food, alcohol, and other medicines may cause unpleasant side effects when you take pain medicine. Follow your doctor's advice about how to prevent these problems. Your pain may gradually improve and narcotic pain medication may no longer be needed. Over the counter pain relief, such as acetaminophen (Tylenol), or non-steroidal anti-inflammatory drugs (NSAIDS) such as ibuprofen (Advil, Motrin), or naproxen (Naprosyn, Aleve) may be beneficial for mild pain.

In some cases, alternative methods for dealing with pain may be beneficial, which are:

- Relaxation techniques such as deep relaxation, meditation, hypnosis, and progressive muscle relaxation, can help to decrease high stress levels which can make pain worse.
- Yoga and/or Tai Chi when approved by your doctor
- Massage when approved by your doctor
- Acupuncture
- Chiropractic when approved by your doctor
- Applying ice or heat to the painful area
- Frequently changing your position (within your recommended activity level)

Medication Side Effects

You may have problems with nausea, vomiting, itching, or a rash while taking pain medicine. Notify your doctor if this happens.

Pain medicine can make you constipated. The following are things that you can do to deal with constipation:

- Eat foods high in fiber such as raw fruits and vegetables, whole-grain breads and cereals, dried fruits, beans, popcorn, and nuts.
- Increase the amount of fluid (water) that you drink daily.
- Walking if approved by your doctor.

If none of the above suggestions help you, notify your doctor.

Do you suffer from pain?

Your Guide to Pain Control Options

What is Pain?

Pain occurs when something hurts, causing an uncomfortable or unpleasant feeling. The presence of pain often means that something is wrong. Each individual is the best judge of his or her own pain.

What is Acute Pain?

Acute Pain comes on quickly, can be severe, but lasts a short time. It is a type of pain that lasts less than 3 to 6 months or pain that is directly related to skin bruises.

What Causes Acute Pain?

- Broken bones
- Burns or cuts
- Dental work
- Infection
- Labor and delivery
- Sprained ankle
- Surgery

Acute pain is of short time but it gradually eases as the injured tissues heal. Acute pain is more sharp and severe.

What is Chronic Pain?

Pain that lasts a long time is chronic pain. It can last longer than six months. This pain can be caused by an injury, illness, or other health problem. You can feel chronic pain in many parts of the body and for many different reasons

This type of pain can continue even after the injury or illness that caused it has healed or gone away. Pain signals remain active in the nervous system for weeks, months, or years. Some people suffer chronic pain even when there is no past injury or apparent body damage.

What Causes Chronic Pain?

- Aging
- Arthritis
- Backaches
- Cancer
- Headaches
- Illness
- Injuries
- Joint Pains
- Nerve Pain

What are Signs of Chronic Pain?

- A dull ache
- Soreness\stiffness
- Stinging
- Squeezing
- Throbbing
- Burning
- Shooting
- Changes in appetite
- Changes in mood
- Changes in sleep
- Fatigue
- Mild or severe pain

Rate Your Pain

Pain Scale (Wong-Baker FACES)



1-3 Mild Pain
Nagging,
annoying, but
doesn't
interfere with
most daily
activities.

4-6 Moderate Pain
Interferes
significantly with
daily activities.

7-10 Severe Pain
Disabling;
unable to
perform daily
activities.

Functional-Comfort
Goal:

How is Chronic Pain Diagnosed?

Your healthcare provider will ask where the pain is located, how long it has been going on, whether it is sharp or dull, constant, or occurs off and on.

The doctor will do an exam. You may have a blood test or imaging tests such as MRI, X-ray, or CT scan. Other tests may be done to see if you have nerve damage or nerve weakness.

Your Treatment Plan

With chronic pain, the goal of treatment is to reduce pain and improve function, so you can resume day-to-day activities. There are many options for the treatment of chronic pain.

Over-the-Counter Medications for Pain

- Acetaminophen (Tylenol and generic)
- Ibuprofen (Advil, Motrin IB, and generic)
- Naproxen (Aleve and generic)

Over-the-Counter Topical Pain Relief

- Creams (Apercreme, Bengay)
- Gels
- Lotions
- Sprays
- Patches

Prescription Medications

- Steroids
- Antidepressants
- Anticonvulsants (anti-seizure)
- Muscle Relaxants

Medication can help manage pain. Some people find it helpful to have a medication plan. Knowing the names of your medications, what they are for, how and when to take them, and potential harmful side effects can help you make an individual medication plan that is best for you.

Your care plan will depend upon the medications that you take and information your doctor, nurse or pharmacist may give you about your medications.

What are Opioids?

Opioids are a type of medicine that can help reduce moderate to severe pain. Opioids are usually given

after surgery or major injury and taken for a short amount of time.

Opioids are strong drugs, but they are usually not the best way to treat long-term (chronic) pain, such as arthritis, low back pain, or frequent headaches. If you take opioids for a long time to manage your chronic pain, you may be at risk of addiction.

What do I need to know about opioid safety?

Safety includes the correct dose, storage, and disposal of opioids.

How are opioids given?

Opioids can be given as a pill, oral liquid, patch, or suppository.

How do I use opioids safely?

- Take prescribed opioids exactly as directed. Never adjust your own doses.
- Do not give opioids to others or take opioids that belong to someone else
- Do not mix opioids with other medicines (antihistamines, anti-anxiety or sleeping pills) or alcohol.
- Always tell your doctor about all medications.
- Talk to your doctor if you have any side effects and risks. The most common side effect is constipation. Other side effects include nausea, sleepiness, itching, and trouble thinking clearly.

How do I store opioids safely?

- Store opioids where others cannot easily get them.
- Make sure opioids are stored out of reach of children.

How do I dispose of opioids safely?

Use an approved drug take-back or mail-back program.

What are other options for treating pain?

There are many things that may help with your pain which do not involve medications. These things may help relieve some pain and reduce the medications required to control your pain.

- Heat helps decrease pain and muscle spasms. Apply heat to the area for 20 to 30 minutes every 2 hours for as many days as directed.
- Ice helps decrease swelling and pain. Use an ice

pack, or put crushed ice in a plastic bag. Cover it with a towel and place it on the area for 15 to 20 minutes every hour, or as directed.

- Acupuncture uses very thin needles to stimulate certain points under the skin.
- Massage therapy may help relax tight muscles and decrease pain.
- Music may help increase energy levels and improve your mood.
- Occupational therapy can teach you how to perform daily activities more easily.
- Participation in social and recreational activities, can reduce stress and improve mobility.
- Pet Therapy can reduce pain and anxiety.
- Physical therapy teaches you exercises to help improve movement and strength, and to decrease pain.
- Prayer can help you release some of the depression and frustrations associated with the pain.
- Relaxation techniques can help you relax, relieve stress, and decrease pain.

Eat a Healthy Diet to Reduce Pain

The food you eat can affect pain. A well-balanced diet is important. Eating healthy foods can reduce inflammation to ease arthritis symptoms, reduce pain, strengthen bones, and promote healing.

A healthy diet should include lots of fruits and vegetables, whole grains, plant-based proteins (like beans and nuts), fatty fish, and fresh herbs and spices.

Drinking plenty of water is the best way to stay hydrated and avoid constipation.

How Can Exercise and Movement Reduce Pain?

Exercise and physical activity are common treatments for chronic pain. Depending on your current state of health, it may help decrease inflammation, increase mobility, strength, endurance, decrease overall pain levels, and improve your quality of life.

Exercise and physical activity are common treatments for chronic pain. Regular exercise can also help you sleep better and reduce your need for pain medications, as well as improve your mood. Strong muscles support the body and bones.

Talk to your doctor or a physical therapist about what type of exercise would be good for you.

- Heart exercise has several physical and mental benefits for people with chronic pain.
- Light-weight and strength training
- Pilates
- Range of motion exercises
- Stretches
- Swimming
- Tai chi
- Walking
- Yoga

Who are Pain Doctors?

- Orthopedic Doctors treat injuries and diseases that affect your bones, joints or ligaments.
- Rehabilitation Physicians treat injuries and conditions using massage, exercise and stretches to reduce pain and increase mobility.
- Rheumatologists treat conditions like arthritis, gout, and tendinitis.
- Pain Doctors specialize in managing chronic pain, often using medications given by mouth or injections.
- Doctor of Osteopathic Medicine (DO) may use manipulation and massage of bones, joints, and muscles to treat pain.
- Chiropractors treat back and neck pain by pressing on joints.

Treatments for Chronic Pain

There are a variety of treatments for chronic pain available, depending on which condition is present.

Questions to ask your doctor

- What is the likely cause of my pain?
- Why won't it go away?
- What is the best treatment option for me?

Will I need medicine?

- Will physical, occupational or behavioral therapy help relieve my pain?
- What about alternative therapies, such as yoga, massage or acupuncture?
- Is it safe for me to exercise? What kind of exercise should I do?
- Do I need to make any lifestyle changes?

Community RESOURCES

Emergency Phone Numbers

Pueblo County Sheriff Department	911
Pueblo Police Department	911
Poison Control (Nationwide)	1-800-222-1222

Hospital Services

Parkview Medical Center	584-4000
Parkview Pueblo West Emergency Room	288-2100
St. Mary Corwin Medical Center	557-4000

Pain Management

Parkview Pain Management.....	562-2360
Parkview Behavioral Services.....	584-4965

Withdrawal Management and Substance Use & Dependency Treatment

Parkview Behavioral Services.....	584-4965
3 Point Alanon Club.....	542-6347
Alcoholics Anonymous	546-1173
Colorado Treatment Services	http://www.cotreatment.com/
Crestone Recovery Services Program	545-2746
Crossroads Turning Points - Outpatient & MAT	546-6666
Crossroads Turning Points - Co-Occurring Outpatient	404-1992
Gateway to Success	https://www.gateway2success.us/
Health Solutions	545-2746
Health Solutions Opioid Treatment Services	543-7115
Health Solutions Youth & Family.....	545-2746
Victory Outreach Center	584-7722

Counseling & Mental Health Services

Parkview Behavioral Services	
Intake & Assessment	595.7891
Adult & Youth Counseling.....	583-8222
Associates for Psychotherapy	564-9039
Catholic Charities Family Counseling Resource Center....	544-4233
Crossroads Turning Points - Co-Occurring Outpatient	404-1992
Friendly Harbor (drop in center for support)	545-2564
Health Solutions Center.....	545-2746
Mental Health America	1-800-969-NMHA
Ombudsman for Medicaid Managed Care	1-877-435-7123
Pueblo Community Health Center.....	543-8711
Southern Colorado Psychotherapy Service	497-9522
Suicide (National) Prevention Lifeline	1-800-273-8255

Meditation, Tai Chi and Yoga Studios

Fountain of Health Yoga Studio	568-0416
Noble Tiger Kung Fu & Tai Chi	948-2206
Open Studio Yoga	696-2835
Pueblo Tai Chi Club	553-3445
Studio Share	963-4907
SRDA Classes: Tai Chi, Chair Yoga, & Jian Qi Gong	

Chronic Pain: The Overlooked Mental Health Issue

Are you or someone you know experiencing chronic pain? Join us to learn skills to help reduce pain and improve health and function.

Group therapy session offered every Monday 1:00-2:00 p.m.

Call 584.4965 to get signed up.

Substance Abuse & Mental Health Support Groups

Adult Children of Alcoholics (ACA)

AA (Alcoholics Anonymous)

AA Open Group

AA Speaker Meeting

Alanon

Addict2Athlete - Call 250-7859 for information

CA (Cocaine Anonymous)

Dual Recovery (Addiction with Mental Health)

NA (Narcotics Anonymous)

Suboxone

Go to www.parkviewmc.com/events for dates and times. Call 584.4965 to get signed up.

ADVANCE CARE PLANNING INFORMATION

Advance care planning involves learning about the types of decisions that might need to be made about your future medical care, considering those decisions ahead of time, and then letting others know about your preferences, often by putting them into an advance directive.

Advance directives give you a voice in decisions about your medical care when you are unconscious or too ill to communicate.

As long as you are able to express your own decisions, your advance directives will not be used and you can accept or refuse any medical treatment. But if you become seriously ill, you may not be able to participate in decisions about your own treatment.

Living Will

A living will is a type of advance directive in which you put in writing your wishes about medical treatment if you become unable to communicate at the end of your life.

Durable Medical Power of Attorney

A medical power of attorney is a document that enables you to appoint someone you trust to make decisions about your medical care if you cannot make those decisions yourself.

Colorado Directive or Medical Orders for Scope of Treatment (MOST)

A Colorado Directive (DNR) or Medical Orders for Scope of Treatment (MOST) are state of Colorado forms that direct health care providers to withhold resuscitative procedures in the event breathing and/or heart stops. By initiating a DNR, patients can document their desire to refuse CPR. By initiating the MOST, patients can document their desire to refuse CPR and other key areas of life-sustaining care. These two forms require your physician's signature.

Your Right to Make Healthcare Decisions Booklet

This is a booklet that informs you about your right to make healthcare decisions including the right to accept or refuse medical treatment. Forms are included that let you say exactly what you want, such as letting you choose the person you want to make health care decisions (medical power of attorney) and saying exactly how you wish to be treated if you get seriously ill (living will). If you are interested in this booklet, tell your nurse. Once it is filled out and properly signed, it is valid under Colorado law. Once complete, give a copy to your nurse. If you need help completing these forms, notify your nurse; she will contact a case manager to assist you. We want to be able to honor your wishes and treat you the way you want and deserve to be treated.

ORGAN DONATION

Organ donation provides an opportunity for you to give life and health to another individual. The decision to be an organ donor should be an informed one. Please inform the hospital staff if you are an organ donor. For information and a donor card, please ask your nurse.

PARKVIEW RESOURCES

Anticoagulation (Coumadin Clinic)

719.595.7650

The Anticoagulation Clinic (also called the Coumadin Clinic) is an outpatient service to monitor and adjust Warfarin (brand names Coumadin® or Jantoven®) doses. Individual dose is based on a blood clotting test commonly referred to as a patient's INR. Physicians prescribe an INR range for Warfarin based on a number of patient conditions to treat and prevent blood clots. Warfarin can be a dangerous medicine if not closely monitored. While on Warfarin, a patient's INR must be checked at least every eight weeks, although it must be checked more often when first starting this medication, when changes are made to other medications or when INR results are out of range. With a physician referral, patients living in the Pueblo area, may have their Warfarin monitored at the pharmacist-run Coumadin Clinic. If outside the Pueblo area, follow-up with your physician will be arranged. Pharmacists at Parkview Coumadin Clinic will do a finger stick INR blood test, adjust the weekly Warfarin dose and schedule follow-up appointments for INR checks. The pharmacists also complete medication reviews and provide education to patients regarding Warfarin interactions with other medications and specific food items. Clinical pharmacists are available 24 hours a day for emergency situations or questions regarding the patient's anticoagulation therapy. Please call if you would like to become a patient of the Parkview Coumadin Clinic.

Cardiopulmonary Rehabilitation

719.595.7620

The Parkview Cardiopulmonary Rehabilitation program provides comprehensive education and exercise programs to help patient's improve cardiovascular and pulmonary health. Our team tailors the program to meet a patient's specific needs according to age, physical condition, and diagnosis. We monitor heart rate, heart rhythm, blood pressure and pulse oximetry while working closely with physicians to optimize a safe exercise program. Our goal is to help patients improve cardiopulmonary health, increase daily physical activity and develop ability to do self-care tasks.

Diabetes Care Center

719.584.7320

Diabetes is a chronic condition affecting all ages. It is controlled by a balanced approach of meal planning, exercise, and medication. The Diabetes Self-Management Program at Parkview offers up-to-date information for the person with diabetes. Services offered by the Diabetes Care Center are: group diabetes self-management classes, individual skill building, Continuous Glucose Monitoring System education, insulin pump program and free diabetes education support group meetings. Nutrition consultations for diabetes, celiac disease, kidney disease, pre and post bariatric surgery and other health conditions are also available. Diabetes education is an investment in your current and future health. For more information or to schedule an appointment, call the Diabetes Care Center.

Diagnostic Imaging

719.584.4551 Main Hospital

719.542.0172 Parkview Imaging Center

719.595.7600 Park West Imaging

Diagnostic imaging refers to technologies that allow a radiologist to look inside the body for clues about a medical condition. Parkview's board-certified and fellowship-trained radiologists are supported by registered technologists and other dedicated team members. Our team has extensive hands-on experience in services including X-ray, CAT scan/CT, MRI, ultrasound, and nuclear medicine. We are designated as a Breast Imaging Center of Excellence, which was earned through accreditation in mammography, breast ultrasound and stereotactic biopsy from the American College of Radiology (ACR). Our Diagnostic Imaging department is available 24 hours a day/seven days a week to meet all your needs.

Homecare

719.584.4324

Parkview Homecare has been named a HomeCare Elite agency several years in a row. Our experienced team of nurses, therapists, C.N.A.s and social workers respectfully and considerately care for the patient's needs, as prescribed by the doctor, in the convenience of their home. We are privileged to assist and teach patients to care for themselves so they are able to continue living in their homes. Our team provides care for a wide range of medical problems, including cardiac, orthopedics, diabetes, wound care and oncology. If you have questions or needs, our team is available all day, every day to assist you.

Outpatient Rehabilitation

719.584.4889

Parkview Outpatient Rehabilitation's team consists of physical therapists to include a balance specialist and an APTA Neurologic Certified specialist. Physical Therapists are certified in dry needling, pelvic floor health and spinal manipulation. The team also includes licensed physical therapy assistants, an occupational therapist specializing in hand therapy, a certified occupational therapy assistant, and rehabilitation technicians providing multiple therapy services. We have solutions for a wide range of injuries, conditions and disorders, including balance disorders, post-surgical rehabilitation, sports injuries, back and neck pain, arthritis, circulatory conditions and neurological disorders. All of our patients receive individualized treatment plans customized to fit their specific needs. We provide state-of-the-art exercise equipment, as well as a handicap-accessible, warm water therapy pool. We are the only facility in Pueblo that utilizes the computerized Balance Master System to perform a comprehensive balance evaluation. We look forward to working with you.

Patient Representative

719.584.4496

Questions and special needs can arise while in the hospital. Parkview's Patient Representative is available to answer questions, solve problems and to ensure patients are satisfied with the care and services they receive. The Patient Representative is available Monday-Friday, 8 a.m.-4:30 p.m. After these hours, weekends and holidays, dial "0" and the hospital operator will page a nursing supervisor.

Wound Center

719.584.7300

The Wound Center is a physician-based, comprehensive outpatient center dedicated to the management of non-healing chronic wounds. The physicians and nursing team have advanced training in wound management, assessment and treatment of diabetic foot wounds, venous stasis/pressure ulcers, trauma, and arterial wounds. In addition, the Wound Center provides state-of-the-art technology such as Silhouette® camera to track the progress of healing wounds and Epifix® in the treatment of venous and diabetic ulcers. Our team also provides case management that may include coordination of surgical procedures, admission, homecare, nursing home and other referral sources, as well as patient/family education in an effort to provide the best possible outcome for the patient.

Sleep Center

719.288.2191

The Sleep Center at Parkview has been accredited by the American Academy of Sleep Medicine since 1996. Our team consists of board-certified sleep physicians and registered technologists. With our state-of-the-art sleep equipment, we have the ability to diagnose and treat all phases of sleep disorders including sleep apnea, narcolepsy, insomnia, and restless legs in adults and children. The Sleep Center has a total of six beds. For your convenience we have private rooms equipped with a bathroom, shower, hair dryer, TV, etc.

Business Office

719.584.4045

Parkview's Business Office team is available to assist with understanding the billing process of the care you received. We are able to provide an estimate of your financial responsibility, offer several payment options to meet out-of-pocket expenses and determine eligibility for financial assistance programs. We also help acquire required referrals or authorizations by your insurance company, verifies your coverage benefits and bills your insurance provider. Please call us with any questions you have regarding your medical billing. We are eager to assist you any way we can.

Volunteers

719.584.4652

Parkview Medical Center volunteers are a precious resource. Without them we would find it difficult to add special touches that our patients appreciate. Volunteers work in the Gift Shoppe, at information desks and in many other departments throughout the medical center. Please call if you are interested in becoming part of our network of caring, committed volunteers.

Parkview Mobile Nurses

719.584.7319

Parkview Mobile Nurses are certified in plant-based nutrition from eCornell University and certified in Plants for the Prevention of Diseases, Forks Over Knives Cooking Class and Food Over Medicine. They believe food is your medicine. They have more than one 100 years of combined nursing experience and are passionate about educating on the power of food choices. They are committed to spreading the message of plant-based nutrition for prevention and treatment of the leading chronic diseases. For further information call or email.

TELEVISION CHANNEL LINE UP

Note: Channels 66-68 Parkview Patient Education Videos

3	FOX (KXRM)	38	Hallmark Channel
4	TBS	40	ION Television
5	EWTN	41	MeTV
6	PBS (KTSC)	42	Disney Channel
7	KXTU-LP (CW)	43	MTV
8	Home Shopping Network (HSN)	44	TV Land
9	QVC	45	Food Network
10	Travel Channel	46	AMC
11	CBS (KKTV)	47	A&E
12	NBC (KOAA)	48	USA
13	KRDO (ABC)	49	CNBC
16	Nickelodeon	50	History
17	Government Access	51	TLC
18	Educational Access	52	Cartoon Network
19	Pueblo Community Access	53	SYFY
20	The Discovery Channel	54	FX
21	Lifetime	55	E!
22	Unknown	56	ESPN
23	PBS (KBDI)	57	ESPN2
24	HGTV	58	TNT
25	Free Form	59	AT&T SportsNet
26	Telemundo	60	MSNBC
27	Univision	61	BET
28	CNN	62	Comedy Central
29	HLN	63	Altitude
30	The Weather Channel	66-68 Parkview Patient Education	
31	C-SPAN	69	Soothing Music
32	C-SPAN 2	96	Gem Shopping Network
34	Fox News		
35	Animal Planet		
37	VH1		

Thank you for choosing Parkview.