



The Empowered Patient Coalition

Your 1, 3, 6, 12 Month Plan To Becoming an *Empowered Patient*®



***A year-long plan to start patients and their advocates
On the right path to high-quality information
And true patient-centered care.****

****Includes our customized chart for understanding the hospital hierarchy.***

YOUR 1, 3, 6, and 12 MONTH PLAN TO BECOMING AN EMPOWERED PATIENT[®]

MONTH ONE

1. Start by filling out the AARP wallet medication form (fold it to fit in your wallet) and include over-the-counter and herbal medications. Keep a copy in your wallet and in your healthcare binder as well.
2. Set up a healthcare binder with dividers for physician visits, test results and procedures. If needed, set up another binder for medical bills, paid and in process. If your condition is complex, create a binder for each condition or physician.
3. Check your medications for drug interactions at www.medscape.com/druginfo/druginterchecker (you will need to register). Make sure to re-check as new drugs are prescribed to you.
4. If overdue for a physical exam, dental exam or eye exam, schedule an appointment
5. Complete your Health Care Directive and Medical Power of Attorney forms.
6. Complete your “family history” before your next doctor’s appointment. Include the ages and existing medical conditions of all close relatives, or their ages at death and causes of death.
7. Think about who you might want to act as your advocate during hospitalization. Be realistic here – do they have a demanding full-time job, access to transportation or their own illness to deal with?
8. Realize that federal HIPAA law guarantees patients access to their medical records. (Psychiatric records may be excluded in some circumstances). HIPAA refers to The Health Insurance Portability and Accountability Act of 1996 Privacy Rule.
9. Read the Hospital Hierarchy chart provided. It is vital to know the roles and experience level of the people caring for you in the hospital.
10. Remember that hospital staffing may be low on weekends or during holiday times. Try to schedule elective procedures at other times.
11. Find out if your hospital utilizes Rapid Response Teams. A RRT is a group of highly-trained hospital staff members who respond to a sudden decline in a patient’s condition.
12. Fill all prescriptions at the same pharmacy to increase the odds that a serious drug interaction will be discovered before they reach the patient. Be sure you every prescription you are handed is readable.
13. Check your BMI or Body Mass Index at www.nhlbisupport.com/bmi. A waist size greater than 35 inches in women and 40 inches in men increases the risk for heart disease and other conditions.
14. Exercise is a vital component of good health. Begin a walking program until you see your doctor and are cleared for more exercise.
15. Eliminate any exposure to second-hand smoke.

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MONTH THREE

1. Health Care Directives are completed and copies given to the person with your Medical Power of Attorney. Place copies in your health care binder.
2. Arrive at your physician visits prepared. Have all questions listed in single sentences with your most pressing concern at the top of the list.
3. If you are hospitalized, try to have an advocate stay with you at all times. You may need a group of people to take shifts.
4. Ask your physician if your vaccinations are up-to-date. Read up on vaccinations and discuss with your physician what schedule is best for you.
5. Write down your vital signs (specifically your heart rate and blood pressure) to know what is normal for you. Keep track of your vital signs from each doctor's appointment.
6. Ask your doctor if you need any of the following tests (all are blood tests except the ECG):
 - Cholesterol (best if total is under 200, LDL – the “bad” one under 100, and HDL over 50).
 - Triglycerides (best if less than 150).
 - C-reactive protein and homocysteine (an indication of inflammation in blood vessels).
 - Vitamin D level – low levels may increase your risk of heart disease.
 - Vertical auto profile (VAP) - measures the size of cholesterol particles.
 - Fasting blood sugar - to check for pre-diabetes.
 - Baseline ECG - to check for abnormalities in the heart.
7. Practice asking health care providers to wash their hands. Repeat to yourself, “I know that I am supposed to ask all health care providers to be sure to wash their hands and I am trying to stay safe from infection.” Say this over and over until you feel completely comfortable.
8. Realize the importance of washing your own hands regularly, both in and out of the hospital. Hand washing is the “holy grail” of infection control.
9. Change your mindset about the use of antibiotics. Antibiotic resistance is now a major public health hazard. Antibiotics are serious medications and should be used with care.
10. Obtain a second opinion for any unconfirmed diagnosis or unresolved medical issues. Ask your doctor if there are any specialists outside your plan that you should consider, especially if your diagnosis is serious. You may be expected to pay out of pocket for these consultations.
11. A second – or third or fourth – opinion is appropriate at any time during your treatment, not just in the early stages of diagnosis. A doctor who does not appreciate other opinions may not be your best choice for a provider.
12. Be certain that all biopsies and scans are read by a second pathologist or radiologist.
13. Report any snoring or symptoms of sleep apnea to your doctor (increases risk of heart attack).
14. Ask if you have any risk factors for diabetes, stroke or heart attack and make a plan to reduce these risks.
15. Ask for a referral to a nutritionist to evaluate food choices, eating habits and to learn to read food labels (the YMCA and the American Heart Association offer nutritional counseling).

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MONTH SIX

1. If unsatisfied with your physician start to search for a new primary care physician.
2. Try to see the same physician at each visit. If you are in a large group practice, it may be difficult to establish a relationship with one doctor. It is generally to your benefit to work with a doctor who knows you and is familiar with your medical history.
3. Keep track of your weight, blood pressure, amount of exercise, medications and any test results in your health binder.
4. Evaluate your insurance plan and know the details of your coverage. Is there a lifetime maximum? Is participation in clinical trials covered?
5. See if unreimbursed medical expenses can be paid through a flexible spending account.
6. No news is not necessarily good news. Call to check on your test results if you don't hear from the doctor.
7. If you have been told that you need surgery, research your hospital at www.hospitalcompare.hhs.gov to see its scores on many basic safety measures. Look up your surgeon at www.patientsrighttoknow.org.
8. If undergoing surgery, ask if your surgeon is a member of the American College of Surgeons. Check their website at www.facs.org. Is the surgeon *board-certified in the specialty you require* for your surgery?
9. If undergoing surgery, review the WHO Surgical Safety Checklist provided with this handout. Expect your hospital to follow all the recommendations on the checklist.
10. If undergoing surgery, know that your surgical site needs to be signed by the doctor who will be performing your surgery and remind all staff to take a "time-out" before the surgery begins.
11. Pain is considered the "fifth vital sign" and all patients have the right to expect excellent pain relief at all times, both in the hospital and at home. Patients can ask to consult a pain management specialist, if needed.
12. If possible, add weight training to your exercise routine to improve muscle mass.
13. Be sure to stretch and remain flexible to reduce your chances of injury during exercise.
14. If menopause symptoms are debilitating, speak to your doctor about low dose hormone replacement therapy. A short course of treatment may be beneficial.
15. Research any medical conditions you may have been diagnosed with and learn the "standard of care" treatment and management options.
16. Ask your dentist if you have any signs of bone loss or periodontal disease at each visit. There is thought to be a relationship between the inflammatory bacteria that cause gum disease and the bacteria implicated in inflammatory heart disease

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MONTH TWELVE

1. A successful doctor-patient partnership is now established.
2. You know how often you need to be seen for routine check ups.
3. All screenings are complete – i.e. colonoscopy, mammogram, Pap smear, bone density, etc.
4. Check blood pressure, blood sugar, etc. at home, if needed, and record the numbers in your binder.
5. You routinely ask for copies of all test results and reports to place in your medical binder.
6. You routinely make a list of questions before each doctor visit.
7. You have an advocate and your “team” selected and ready to spring into action, if needed.
8. When you visit the Emergency Room as a patient or as an advocate, you realize that a triage process will be used. If possible, arrive prepared to answer the following questions: What is the problem or condition that brought you to the ER? What symptoms is the patient having? When and how did the symptoms start? What medical conditions does the patient have? What medications does the patient take and do they have any allergies?
9. Remember to regularly ask “What else could this be?” Encourage a broad focus.
10. Look at the Aging with Dignity website at www.agingwithdignity.org and peruse their “Five Wishes” document. This is the type of detailed information that should be addressed in your Advance Directive and discussed with the person who has your Medical Power of Attorney.
11. Keep a copy of your child’s immunization record in your purse, wallet or the glove box of your car. In the event of an emergency or an unanticipated trip to the hospital, you will need this information.
12. If you have an issue with your insurance company about a denial of coverage, contact the Department of Managed Care. You can also contact the Patient Advocate Foundation for resources on insurance and medical bills.
13. If you are acting as an advocate for another person, remember that you must keep all information private at all times.
14. Know that you can always ask for a more experienced physician in the hospital or the emergency room, even after hours. Ask that an Attending Physician be consulted in person or over the phone.
15. Realize that there are always Hospital Administrators on call 24 hours a day for serious issues that arise during hospitalization.
16. The Centers for Medicare & Medicaid (CMS) will no longer reimburse hospitals for “Never Events.” These are the events that should not happen to hospitalized patients: Falls and trauma, infections from IV lines, complications from not controlling blood sugar levels, catheter-associated urinary tract infections, Deep Vein Thrombosis (DVT) and Pulmonary Embolism (PE) following total hip or knee replacement, foreign object retained after surgery, surgical site infections (SSI) that arise after coronary bypass or certain orthopedic and bariatric procedures, air embolism, blood incompatibility and Stage 3 and 4 pressure sores.

