

Prepare for your Hospital Stay Worksheet

This worksheet summarizes the information and documents that will enhance the quality of care you will receive if hospitalized. The forms are included on this website and can be printed for your files. Copy and bring this form as well as the ones described below.

- **Medication List:** Make copies of your medication log to give to your nurses and doctors. Remember to update this each time your medicines are changed.
- **List of medicines you should not have:** Common anti-hallucination and anti-nausea medicines can worsen movement. Both nausea and hallucinations can occur with certain medicines and during illness.

Note: This is not a complete list of medicines to avoid; if you have questions about other medications; ask your pharmacist or doctor. The anti-hallucination medicines Quetiapine (Seroquel) or Clozapine (Clozaril) can be used for hallucinations and psychosis. The following should be avoided:

- aripiprazole (Abilify)
- chlorpromazine (Thorazine)
- flufenazine (Prolixin)
- haloperidol (Haldol)
- molindone (Moban)
- perphenazine (Trilafon)
- perphenazine and amitriptyline (Triavil)
- risperidone (Risperdol)
- thioridazine (Mellaril)
- thiothixene (Navane)

Anti-nausea medicines to avoid

- metoclopramide (Reglan)
- phenothiazine (Compazine)
- promethazine (Phenergan)

Symptom Checklist: This Checklist located is important as certain symptoms such as swallowing, dizziness, constipation, and confusion could worsen in the hospital. These symptoms could influence your healthcare treatment decisions.

The following advanced directives insure that your rights and personal wishes are respected in the event of a medical emergency or change in your health status in which you are unable to make decisions for yourself. Many options are available to help you with these documents. It is suggested that any document be reviewed by your attorney to insure your wishes are accurately recorded. Check with the department of health in your state for additional guidance.

Health Care Proxy: This document gives a designated person the power to make health decisions for you if you are incapacitated and unable to do so.

Durable Power of Attorney: This document gives a designated person the power to make certain legal, financial and disability decisions for you in the event that you are incapacitated and unable to do so.

Living Will or Healthcare Directive: This is a written document that specifies what type of medical treatment you desire if you become incapacitated. The State of Washington recognizes the POLST (Physician orders for life-sustaining treatment) Form as a legal document.

Signed statement identifying a friend or family member that your doctors can talk to about your treatment.

Inform hospital staff of the following:

Highlight your need for medicines on time.

Discuss what you can do in the medicine *on* vs. medicine *off* state so that they are aware of any potential changes in your movement. This is an opportunity to reinforce the need to "get your medicines on time."

Describe your dyskinesia and freezing episodes and when they occur as these symptoms may be unfamiliar to your team.

What to ask for during your hospitalization:

- Physical therapy, Occupational therapy, Speech/Swallowing therapy especially if you have trouble with balance, swallowing, and generalized mobility.

- Chaplain services or social work consult for support of you or loved ones.

What to know or ask before discharge:

- What problems should I look for related to this hospitalization or my condition and who should I call?
- Do I have a complete and accurate list of medicines and changes made?
- Do I have prescriptions and can I fill the prescriptions at time of discharge?
- What procedures or new diagnoses do I have?
- Do I need inpatient rehabilitation, home health services, outpatient rehabilitation or other specific appointments?
- When should I see my doctor?
- How do I get a copy of my records for myself and my doctors?