

Going Home Preparation Packet

A guide for patients preparing to return home when leaving a hospital, nursing home or other health care setting

Important Questions to Ask Before Discharge

What are the options for care after discharge? _____

What sorts of medical equipment will be needed (such as a walker)? _____

Who is arranging the delivery of the medical equipment and what is the number to call with questions about the equipment? _____

Circle the tasks below that you would like help with after discharge and notify the staff of these needs:

Bathing

Dressing

Using the bathroom

Climbing stairs

Cooking

Food shopping

Housecleaning

Paying bills

Getting to doctors' appointments

Picking up prescription drugs

Are there any special tasks such as changing a bandage or giving a shot that need to be demonstrated and taught? Write down a name and phone number to call if help is needed. _____

Are there support groups or a social worker to speak with regarding any concerns about how you or your family is coping with the illness? _____

Are there ways to get help with the cost of care? What will insurance cover? _____



Supporting Independence at Home

Questions for the Caregiver

Can you give the patient the help he or she needs? _____

Any concerns to address with the staff? _____

Important Phone Numbers

Emergency contact person's name and phone number(s) _____

Pharmacy (location and phone) _____

Primary physician's office (location and phone) _____

Name and number of discharge planner or social worker _____

Name and number of home care agency Live Free Home Health Care, (603) 217-0149 _____

Checklist of Important Information to Receive Before Discharge

Ask for written discharge instructions that you can read and understand and a summary of your current health status. Bring this information and your drug list with you to your follow-up appointments. Make sure the written discharge instructions include the following:

- Summary of current health status
- List of medical equipment needed
- Steps to take to improve health
- Anticipated symptoms
- How to respond to anticipated symptoms
- Problems to watch for
- How to respond to problems
- Exercise instructions
- Exercise restrictions
- Dietary restrictions
- Contact name and number for questions
- Follow-up appointment date, time and location



Upcoming Appointments

APPOINTMENTS & TESTS	DATE	PHONE NUMBER

Questions to Ask the Doctor

Check any of the boxes below and write notes to remember what to discuss with your doctor.

I have questions about:

- My medicines _____

- My test results _____

- My pain _____

- Feeling stressed or depressed _____

- Changes in my health _____

- Other questions or concerns _____

Medications for _____
NAME

Medication allergies _____

List prescription drugs, over-the-counter drugs, vitamins and herbal supplements. Be sure to inform the staff what drugs, vitamins, or supplements were taken regularly before admission. Ask if you should still take these after you leave. Write down a name and phone number to call if you have questions.

MEDICATION NAME	WHAT IT DOES	DOSE	WHEN TO TAKE	HOW TO TAKE

Sources: The Agency for Healthcare Research and Quality, The Centers for Medicare and Medicaid Services