

# Hospital Visits for Those With Memory Loss

Planning Ahead – Tips for Friends and Family Members



SIXTY PLUS SERVICES

 **Piedmont**  
HEALTHCARE

**A trip to the hospital is hard for anyone, but more so for those with memory loss. This brochure can help reduce your stress by helping you plan ahead. Here are tips on how to support and comfort your family member as well as how to work closely with the hospital staff.**

### **Identifying People You Can Call On**

Identify at least two dependable family members, neighbors or friends known to the patient that you can call when a trip to the hospital is required. They can go with you or meet you there so that one person can take care of the paperwork and the other can stay with your family member.

### **“Hospital Visit” Bag**

Be prepared. It is likely a time will come when a trip to the hospital or emergency room will be necessary. By having these things ready to go, the stress and anxiety can be reduced.

- A list of health insurance companies with policy numbers and pre-authorization phone numbers, Medicare and Medicaid card numbers, all physicians and addresses/phone numbers.
- List of phone numbers of key family members, clergy, helpful friends, etc.
- List of current medications, doses and the physician who prescribed.
- List of all allergies to medicines and food. Also list medicines that have caused problems.
- Copies of Durable Power of Attorney, Health-care Power of Attorney and Living Will.
- A change of clothes and a plastic bag for soiled clothing.
- Extra adult briefs or Depends if used at home.
- Moist hand wipes.
- Paper and pen to write down information and directions. You may want to write down the symptoms to show to the doctors and nurses.

- A sealed snack such as crackers and a bottle of water or juice for you and the patient.
- Pain medication such as Advil or Tylenol for yourself.
- A reassuring object for the patient such as a picture, stuffed animal or a blanket.
- A small amount of cash.
- A note on outside of bag to take cell phone and ALL current medications.
- A card to show the staff that says “My family member has memory issues. Let me help with specific questions.” Avoid talking about the memory changes or problem behaviors in front of the patient. It can be upsetting and embarrassing.



- Be able to report what was occurring just prior to the emergency event.
- Triage is where they identify and rank the seriousness of patients as they arrive. The ED is not first come, first served.
- Be prepared to wait, both in the waiting room and in exam room for tests to be run and for doctors to call back.
- EDs can be noisy and frightening. Your calm and confident presentation will help calm the patient; offer physical comfort and reassurance as well.
- Help the staff understand your person's condition.
- Many medical conditions are treated and released followed by a release back home. Do not be surprised if your the patient is not admitted to the hospital.
- Do not leave the ED without a follow-up plan. Ask for details and clarification. Most instructions include seeing the primary physician within a short period of time. Even if you feel the problem has been resolved, notify the PCP of the emergency department visit.

## Planning a Hospital Admission

- Do not talk about the hospital stay in front of the person as if he/she is not there.
- As much as possible let him/her take part in planning the stay.
- Plan ahead: Make a schedule of family and friends who can take turns sitting with the patient during the entire hospital stay.
- Just before leaving home, find a way to say that the two of you are going to spend a short time in the hospital. Keep the conversation simple, avoiding long explanations.
- Pack comfort items that will help your loved one feel safe and secure: favorite clothes, blanket, photos, recorded music, etc.



## Hospital Stay

- Make sure someone stays with patient at all times. This will keep the patient calmer, less confused, and aid the medical staff when they ask questions. It will also help to keep the patient safer, as you can make sure they don't remove intravenous medications, assist them with using the bathroom, etc.
- Answer the medical staff's questions outside of the patient's room. Ask the staff to limit direct questions to the patient if he/she is struggling to answer.
- Ask the staff to avoid physical restraints.
- Open food containers and remove trays. Help order meals.
- Offer and remind the patient to drink fluids.
- The strange surroundings and medical attention will stress the patient resulting in a need for more help with personal care than is ordinarily required at home. This is a sudden temporary confusion that usually resolves with time. But the increased confusion and need for more assistance may last until well after discharge. The patient may require additional help when they go home to assure safety.
- Assume the patient will have problems finding the bathroom, using the call light, and sleeping soundly at night.
- Decide with the staff who will do what for the patient. You may want to be the one to help with bathing, eating or using the toilet.



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