



PREPARING FOR A MEDICAL APPOINTMENT

If going to the Emergency Room (ER)

- **Bring the person's Medication Records, Insurance Card, Health History Information!!!**
- Be prepared to tell Emergency Room staff why you are bringing the person to the ER
- If you have any concerns about taking the person home (or to work/day program) after the visit, tell the emergency room staff and contact your supervisor before leaving the hospital

1. What Healthcare practitioner is the appointment with and for what?

- PCP – annual physical evaluation injury illness follow up recommendation for consultants
 Eye doctor Neurologist Physical therapy Dentist Other _____

If the appointment is to go over lab/test results, does the health care practitioner have the results prior to the appointment?
 Yes No If no, can they be obtained or should the appointment be rescheduled? _____

2. **Have a clear understanding of why you are going to the appointment! If not, ask!**

Reason for appointment: _____

3. Who should be involved with this appointment? Family Guardian DSP Nursing

4. What questions need to be asked of the healthcare practitioner? _____

5. What concerns need to be addressed for the individual? _____

6. What is the expected outcome of this appointment? _____

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7. Before you leave, make sure you have the following: Consider having a “grab and go” book!

- A. Person’s insurance card, face sheet, and consent to treat form
- B. Copy of current medication sheets/ medication administration record
- C. The following forms:
 - Health History Information Form
 - Annual Health Screening Recommendations
 - Health Review Checklist
- D. Directions to the appointment and money for parking
- E. Agency on-call information (in case you need to contact someone)
- F. Family/Guardian contact information
- G. Name of the pharmacy, telephone number and directions
- H. If it is a mental health appointment, is this for follow up for medication effectiveness? Is there a tracking sheet needed for specific data?
- I. Call ahead to see if the doctor is running late!

8. Prepare the person for the appointment

- A. Discuss what is going to happen at the visit
- B. Follow any instructions to medically prepare for the visit (for example, pre-medications, fasting, wearing loose and comfortable clothing, need for accommodation for a wheelchair).
- C. Does the procedure require assistance with positioning, transferring, etc? **Make sure there has been communication from experienced staff who knows how the individual best handles appointments.**
- D. Be prepared to wait! Bring items to keep the person occupied, and money for a drink or food.
- E. People have a lot of anxiety – does there need to be a prescription prior to the appointment?
- F. Plan on being 10 minutes early!

9. When you get to the appointment, do the following:

- A. First, check in with the receptionist and introduce yourself and the person you are accompanying
- B. State the reason that you are there and any problems the person is having. If the person can speak about their health, encourage and assist him/her to do so.
- C. Discuss any accommodations the person may need in the waiting room
- D. Present any forms that need to be filled out

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10. During the appointment, help the person and health care professional.

- A. Introduce yourself to both the office nurse and the treating health care professional so they know who you are. Let them know you are there to help both the individual and the health care providers.
- B. Set the tone. State, “We are here today because...” or ask “What routine tests should be scheduled for someone this age?”
- C. You may have to “reboot” the healthcare professionals as to who the individual is and why you are there. It is not uncommon for a doctor/ARNP to forget the details of a person’s situation. Be friendly and cooperative – remember the outcome you want from this appointment!
- D. State your information in a clear and focused way – do not be distracted by casual conversation. Read from your list if necessary!
- E. Feel good about asking questions! If necessary, remind the doctor/ARNP that you have to explain this information to other caregivers and to the guardian.
- F. If needed, assist the individual during the appointment. Provide information to the health care professional when asked and/or help the individual to answer questions. If you do not know the answers to the questions, tell him/her you will find out and get this information! As how best to contact him/her between appointments!
- G. Make sure to give the nurse/MD a release of information and ask them to fax their notes back to your agency

11. Obtain the written results of the appointment and the written recommendations:

- A. Obtain the completed forms. Write down any information that is given to you that is not on the forms.
- B. Do not leave until you understand instructions. Make sure what they wrote is what they told you.
- C. If the doctor/ARNP orders medications or treatments, ask yourself the 7 Important Questions about the new meds - do you have everything you need?
- D. BEFORE you leave the room, re-read your list and make sure you have covered every thing and that you feel confident that you could explain everything that happened at the appointment to someone else.
- C. Pick up any prescriptions. Make sure the med list written matches the prescriptions unless deliberately changed.
- D. Get a copy of lab work!
- E. Please remember to get signed doctors’ orders for all prescriptions and treatments
- F. Set up another appointment with the receptionist if needed

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12. Bring back all forms, any prescriptions, doctor's orders, and the appointment card to the appropriate person.

- A. Make sure everything is in writing for clear communication to all other staff in the residence. Is there a communication book?
- B. Update the guardian – what do you do if you have difficulty reaching the guardian?

13. After the Appointment – Who Needs to Know About This Appointment?

How are you going to communicate?

- Day program staff – should be given an update even if a new medication is not given during day programming – new medications will most likely take effect during the day
- DSPs should be given a copy of the health note, treatment sheet, and instructions on what to document, etc.
- Residential staff: residential manager is responsible for developing a clear method of communicating health information and medication changes to all staff.
- Service Coordinator – call and give update or leave message with update.
- Nurse – call to update

14. Whenever a change in an individual's medication occurs:

- Fill prescriptions right away – doctor's orders should be started within 24 hours unless otherwise instructed. Antibiotics need to be started right away!!
- Before leaving the pharmacy, look at each bottle to make sure label is correct and matches your orders. What if the pharmacy is unable to fill the prescriptions?
- Before calling the nurse, review the medication information – have the written order, medication bottle and med log in front of you when you call. Ask the nurse if you have any questions about the order or about setting up the med log.
- Are there special instructions, schedules, or storage requirements?
- Are there possible interactions with other medications?
- Check allergy information!