

PATIENT SAFETY AND INFORMATION GUIDE

JAY HOSPITAL

Should you need anything during your stay, call ext. 8216.



Don't forget to ask . . .

Questions often arise between visits by your doctors and nurses. Use this document to jot down those questions. Talk with your health care providers to remain informed about your condition and treatment. Ask them to explain anything you don't fully understand. **You are an important member of your health care team.**

about what is wrong with me (my diagnosis) or changes in my condition.

Questions

Answers

about my treatment and care.

Questions

Answers

about medical tests or results.

Questions

Answers

about my medications.

Questions

Answers

about what I need to do.

Questions

Answers

about my discharge date and instructions.

Questions

Answers

other questions for my care team.

Questions

Answers

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Mike Hutchins, FACHE
Vice President,
Baptist Health Care
Administrator, Jay Hospital

THANK YOU FOR CHOOSING JAY HOSPITAL

Our Jay Hospital team is here for one reason — to provide you with world-class care in a compassionate environment. We hold ourselves accountable to provide quality health care and, as a faith-based organization, to do so with respect, courtesy and dignity. We honor a set of core values that are woven into our system’s culture: ownership, integrity, compassion, excellence and service.

To help ensure that we consistently improve our services, we provide surveys by mail, email or text message to randomly selected customers following their stays at our hospital. You may be contacted by our survey vendor, Press Ganey, and if so, we encourage you to complete the survey.

Please know that your comments and questions are welcome at any time during your care. We hope we have answered all of your questions, but if not, don’t hesitate to ask your nurse or call 850.675.8212.

As the only not-for-profit and locally owned health care provider in the region, we have a personal interest in the health of you and your loved ones.

Sincerely,

A handwritten signature in black ink that reads "Mike Hutchins". The signature is written in a cursive, flowing style.

Mike Hutchins, FACHE
Vice President, Baptist Health Care
Administrator, Jay Hospital

OUR MISSION

The Mission of Baptist Health Care is to help people throughout life's journey.

OUR VISION

The Vision of Baptist Health Care is to be *the* trusted partner for improving the quality of life in the communities we serve.

OUR VALUES

OWNERSHIP

Accountability, engaged, stewardship, responsive, committed

INTEGRITY

Honest, principled, trustworthy, transparent

COMPASSION

Empathetic, merciful, sensitive, kind, giving, forgiving, hopeful

EXCELLENCE

Safety, quality, distinguished, learning, improving

SERVICE

Welcoming, attentive, humble, respectful, exceeds expectations, collaborative



WE WELCOME YOU

The team members of Jay Hospital want to make your stay as comfortable as possible. Your health and well-being are our top concerns, and our goal is to exceed your expectations. This guide is designed to answer your questions and ease the transition from home to hospital for both you and your visitors. If we forgot to mention something, or if you have additional questions, please call 850.675.8216 or call the house supervisor at 850.675.8212. Our nurse administrators will answer your questions or find someone who can.

ADMITTING

Patients are admitted to Jay Hospital at the registration area or through the emergency department.

INSURANCE AND PHOTO IDENTIFICATION

You will need your insurance card and your personal photo identification when you are admitted. Information from your insurance card and photo ID will be included in your registration information. Your photo ID will be reviewed and scanned to ensure your medical identity remains protected. A registration team member will verify all of this required information each and every visit. You also will be asked to sign consent forms for treatment. A parent or guardian must sign consent forms for minors. Other required patient information can be provided at check-in.

Hospital policy states that patients must provide insurance information prior to or at the time of admitting. When no insurance information is available for a patient previously admitted to the hospital, team members will use past admitting history for the insurance information as long as the patient confirms this information is still correct.

New patients with no past hospital history will be admitted as "self pay." When this information is received and confirmed, records will be updated to match current insurance information.

Upon admission or during your stay, a financial representative will speak to you regarding your insurance coverage and your financial responsibility. A payment resolution will be made at that time.



PHYSICIAN ORDERS

A physician order with an admitting diagnosis is needed for admission. Our physicians will send admission orders through our electronic system or by a physician order form.

SURGICAL AND PROCEDURAL SERVICES

A pre-procedural nurse will contact you prior to your scheduled procedure with information on times and preparation. On the day of your procedure or surgery, you will sign surgical consents and insurance forms and may have laboratory work and diagnostic tests ordered by your doctor, including EKGs and X-rays. If you have any questions, please write them down and ask the nurse or call Surgical Services at 850.675.8189.

TIPS FOR SURGERY/PREVENTING ADVERSE EVENTS

Before surgery, talk with your surgeon and anesthesiologist (the doctor or nurse who will put you to sleep) about:

- Risks, benefits, alternatives and possible outcomes of your procedure
- All medications (including over the counter medicines like aspirin and supplements) you are taking before surgery and which ones you should stop taking prior to surgery
- Your medical history and any medical conditions you have

Have someone you trust take you to and from your surgery and be with you at the surgery facility. Have someone you trust available to make medical decisions for you at times you are not able to make your own decisions. If your surgery is outpatient, you will need someone to stay with you for at least 24 hours post op.

- Take care of your body before surgery:
 - Shower and wash your hair before surgery.
 - Do not wear make-up or fingernail polish.
 - Do not use a razor in the area of your surgery prior to surgery. (This may increase the chance of infections because of the risk of leaving small cuts on the skin.)
 - A surgical technician or nurse may remove hair at your surgical site, if needed, using clippers.

To help prevent surgical infection:

- Manage your glucose (blood sugar) between 80–140, especially before and after surgery.
- Stop smoking (at least as long as possible before and after surgery).
- Keep warm. (Wear warm clothes, heat your car before coming to hospital in cool weather, ask for blankets if you are cold, etc.)
- Wash your hands often and always ask everyone (including doctors and nurses) when they enter the room to clean their hands. Hand sanitizer or soap and water should be used by everyone when they enter and exit your room. If you do not see them do so, ask your care team members to wash their hands before examining or providing care for you.
- Most preventative antibiotics should be given within 60 minutes before surgery and should be stopped within 24 hours in most cases. Ask your doctor or nurses about antibiotics before your surgery.
- Ask your surgeon or nurses about the following if you have any questions:
 - A “time out” is performed just before surgery by your surgical team. This is done to make sure they are doing the right surgery on the right body part on the right person.

If appropriate, your surgical site will be marked to ensure correct-site surgery.

- Make sure a hospital arm band is placed on you. Make sure the information is correct, as it will be used for patient identification.
- Blood clots can lead to heart attacks and strokes. When you have surgery, you are at risk of getting blood clots because you do not move while under anesthesia. Your doctor will know your risks for blood clots and take steps that will help prevent them, such as giving you the right medications before and after surgery.

RAPID RESPONSE PROCESS FOR PATIENTS AND FAMILY MEMBERS

The nursing supervisor is trained to assist when there are signs that a patient may be getting sicker. Their purpose is to provide help before a change in condition progresses to a medical emergency.

The nursing supervisor and nurses act very quickly when something has changed with the patient's condition. They are in collaboration with the doctor and may suggest laboratory tests, X-rays, medications or even a transfer to a higher level of care. We are committed to providing the best care to our patients and take the concerns of family and loved ones seriously.

WARNING SIGNS THAT A PATIENT MAY BE GETTING SICKER:

- Change in the heart rate or respiratory (breathing) rate
- A drop in blood pressure (much lower than it has been)
- Changes in urinary output (much more or much less urine)
- Confusion or other changes in mental (thinking) status
- Something simply does not look or seem right with the patient

HOW FAMILY MEMBERS CAN HELP

- Ask the nurse taking care of your family member to look at the patient so that you can share your concerns.
- Ask the nurse or patient care technician to notify the nursing supervisor.

or

- Dial 8216 and ask for the Rapid Response Team to be called to the patient's room.





PATIENT BILL OF RIGHTS

THE RIGHTS AND RESPONSIBILITIES OF OUR PATIENTS

Baptist Health Care, in order to foster better channels of communications, closer patient and hospital relationships and more efficient care, is pleased to share the following Bill of Rights for you and your family.

YOU, OR WHEN APPROPRIATE, YOUR DESIGNATED REPRESENTATIVE, HAVE THE FOLLOWING RIGHTS TO:

- Be treated with courtesy and respect, appreciation of your individual dignity and protection of your need for privacy. Expect full consideration of your privacy and confidentiality in care discussions, examinations and treatments. You may ask for a chaperone during any type of examination
- Receive respectful and compassionate care regardless of your age, gender, race, religion, culture, language, disabilities, socioeconomic status, sexual orientation, or gender identity or expression
- Be called by your proper name and know the identity and professional status of the individuals providing medical services and care
- Receive information in a manner that is understandable and have access to a sign language or foreign language interpreter at no cost to you
- Be informed of patient support services available to you at Baptist
- Receive prompt and reasonable responses to questions and requests
- Be provided with information about advance directives, living wills or durable powers of attorney for health care decision making and have your health care provider or Baptist comply with these directives

- Be told by your health care provider about your diagnosis and possible prognosis, planned course of treatment (plan of care), the alternatives, benefits and risks of treatment, and expected outcome of treatment, including unanticipated outcomes. You have the right to give written informed consent before any non-emergency procedure begins.
- Be informed of your health status and be able to request or refuse treatment that is medically necessary and accept or refuse medical care or treatment, except as otherwise provided by law.
- Be given, upon request, full information and necessary counseling on the availability of known financial resources for your care and a copy of an itemized bill
- Know, upon request and in advance of treatment, whether or not your health care provider or health care facility accepts the Medicare assignment rate if you are eligible for Medicare
- Be given the Medicare Outpatient Observation Notice within 36 hours if you are a Medicare beneficiary and are receiving observation services. As a Medicare beneficiary, you also have the right to be provided the "Important Message from Medicare," which describes Medicare non-coverage and the right to appeal premature discharge. Non-Medicare beneficiaries receiving observation services also have the right to be notified within 36 hours.
- Receive treatment for emergency medical conditions that will deteriorate from failure to provide treatment.
- Receive care in a safe environment free from all forms of abuse, neglect or harassment.
- Be free from restraints and seclusion in any form that is not medically required.
- To retain and use personal clothing or possessions as space permits, unless doing so would infringe upon the rights of another patient or is medically contraindicated or unsafe for you or others.
- Expect that all communication and records about your care are confidential, unless disclosure is allowed by law. You have the right to see or get a copy of your medical records and have the information explained, if needed. You may request an amendment to your medical record by contacting the medical records department. Upon request, you have the right to receive a list of names to whom your personal health information was disclosed.
- Know if medical treatment is for purposes of medical research and to agree or refuse to take part in medical research studies.
- Voice your concerns about the care you receive. If you have a problem or complaint, please tell your nurse, charge nurse or the unit manager. If still unresolved, you may also file a grievance or complaint. [See Page 9.](#)
- Be asked upon admission whether you want a family member or representative and your physician notified of your admission, and if so, they will be promptly notified.

- Bring any person of your choosing to patient-accessible areas to accompany you while receiving inpatient or outpatient treatment or while consulting with your provider, unless doing so would risk your safety or health or the safety or health of others.
- Be made aware of what facility rules and regulations apply to your conduct.
- Be informed of patient visitation rights.

AS A PATIENT, YOU HAVE A RESPONSIBILITY TO:

- Provide, to the best of your knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other matters relating to your health and to provide, upon admission, a copy of your advance directive if you have one
- Report any unexpected changes in your condition to the responsible medical care provider
- Report whether you clearly understand each proposed course of action in your care and what is expected of you
- Be responsible for your actions if you refuse treatment or do not follow your medical care provider's instructions
- Assure that the financial obligations of your health care are fulfilled as promptly as possible
- Follow hospital rules and regulations affecting patient care and conduct
- Be considerate of the rights of other patients and hospital personnel, especially with regard to minimizing noise, refraining from smoking and assuring the appropriate conduct of your visitors
- Be respectful of the property of others

No list of guidelines can ever fully describe the ideal relationship that should exist between you, the hospital and our team members. Nor can this ideal ever be fully put into words. It exists in practice as a spirit of mutual trust, cooperation and respect.

It is this spirit that we constantly try to foster. We hope the information provided in this Bill of Rights will give you greater insight into how the hospital seeks to achieve this aim and how you can participate in advancing and sustaining it.

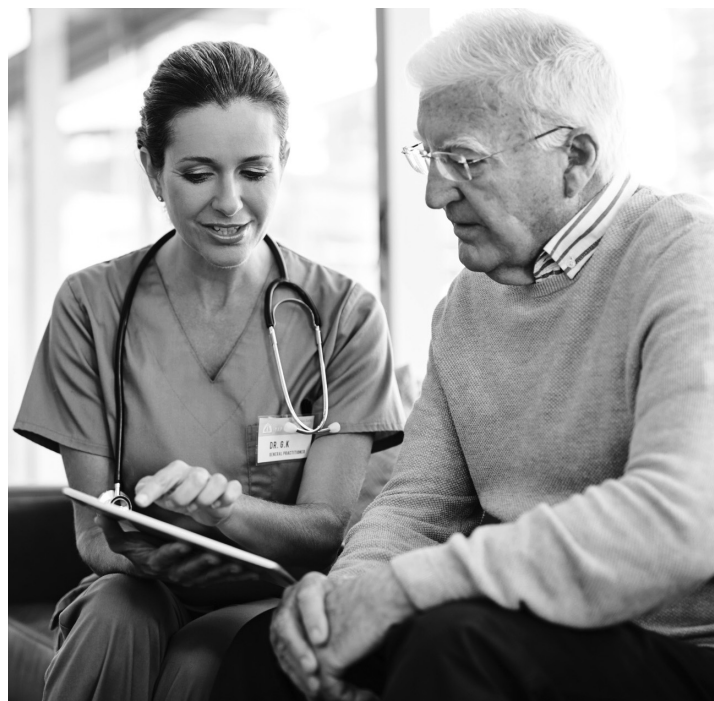
If you feel you would like to obtain further information about these rights and responsibilities or to express your point of view on any aspect of your health care program, please ask to speak to the nurse manager or house supervisor, or you may write or call a representative of administration.

Please note that if a patient is a minor and unable to make these determinations, this information applies to the parent or guardian. If the patient is, for any reason, incapable of participating in the decision-making process regarding medical therapy, this information applies to the designated responsible adult or health care surrogate.

REGULATORY AGENCIES

FILING A GRIEVANCE OR COMPLAINT

If you have concerns about patient care and safety at Baptist Health Care, please tell a nurse, nurse leader or house supervisor. You may also contact Baptist Health Care Clinical Safety & Excellence department at 850.434.4820. If these patient care and safety concerns continue to remain unresolved, we encourage you to contact the Florida Agency for Health Care Administration at 2727 Mahan Drive, Tallahassee, FL, 32308 or call 1.888.419.3456. You may also contact DNV Healthcare by phone at 1.866.496.9647 or via their website at dnvhealthcareportal.com/patient-complaint-report. You may also contact The Center for Medicare and Medicaid Services (CMS) at 7500 Security Blvd., Baltimore, MD 21244 or by calling 800.633.4227 or cms.gov/center/ombudsman.asp.



HOSPITAL QUALITY MEASURES



Hospital Quality Measures/Patient Safety Information

Hospital name: JAY HOSPITAL

Date: 05/11/2022

Patients admitted to the hospital for treatment of medical problems sometimes experience other serious injuries, complications, or conditions. Some patients may experience problems soon after they are discharged and need to be admitted to the hospital again. These events can often be prevented if hospitals follow best practices for treating patients.

Health Care Associated Infections (HAI)

July 2020 through March 2021

HAIs are infections that occur while a patient is being treated in a hospital. Many of these infections can be prevented through the use of proper procedures and precautions. Infection reports compare the infections at a hospital to a national benchmark.

	Catheter Associated Urinary Tract Infection	Central-line Associated Bloodstream Infection	Clostridium Difficile Infections	Methicillin-resistant Staphylococcus aureus	Surgical Site Infection from Abdominal Hysterectomy	Surgical Site Infection from Colon Surgery
State Benchmark	0.658	0.652	0.481	1.063	0.937	0.726
Facility Rating	N/A	N/A	N/A	N/A	N/A	N/A

- ★★★ Better than the U.S. National Benchmark
- ★★ No different than the U.S. National Benchmark
- ★ Worse than the U.S. National Benchmark
- N/A No results available

Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)

July 2020 through March 2021

Patient surveys measure satisfaction with hospital care, nurse and doctor communication, staff response to needs, and the cleanliness and quietness of the hospital.

	Overall Hospital Rating
National Average	73%
State Average	67%
Facility Overall Rating	N/A

- ★ The star ratings range from ★ - ★★★★★ stars
- (%) The percent of patients surveyed who gave the hospital the highest possible score
- N/A No results available

15-Day Readmission Rate

April 2020 through March 2021

Patients should not normally be readmitted to a hospital within 15 days of a hospital stay for the same or a related condition. A low 15-Day readmission rate generally means the hospital is doing a better job of managing a patient's condition and helping arrange proper post-hospital care coordination.

	15-day Readmission Rate
Statewide Rate	6.53%
Facility Rate	6.51% (As Expected)
(%) The percentage of patients readmitted within 15 days of initial discharge (As Expected, Lower than Expected, or Higher than Expected) is based on the severity of patients seen.	
N/A No results available	

For more information: FloridaHealthFinder.gov: <https://www.floridahealthfinder.gov/CompareCare/Glossary.aspx>
 HCAHPS: Patients' Perspectives of Care Survey Webpage: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HospitalQualityInits/HospitalHCAHPS>

NON DISCRIMINATION NOTICE

Baptist Health Care complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Baptist Health Care does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Baptist Health Care provides:

- Free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters and video remote interpreting
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the house supervisor at 850.675.8212 or the main hospital number at 850.675.8216.

If you believe that Baptist Health Care has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: ADA Coordinator, 1717 North E St., Suite 402, Pensacola, FL 32501, 850.434.4018, ADACoordinator@bhcpns.org. You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, call the ADA coordinator at 850.434.4018 and let us help you. However, if you feel you need additional support, you can file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Ave. SW., Room 509F, HHH Building, Washington, DC 20201, 800.868.1019, 1.800.537.7697 (TDD).

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

LANGUAGE AND INTERPRETER SERVICES

At Baptist Health Care, we provide free professional medical interpreters to patients who are LEP (limited English proficiency) or who are deaf, hard of hearing, vision impaired and/or blind. Language services are available 24/7 to all patients and families for appointments, procedures and hospital stays. There is no cost to patients for interpretations at the hospital or any of our facilities. The hospital will provide appropriate

auxiliary aids free of charge, including language line services, in-person interpreters, video remote interpreting and written materials. Please contact the house supervisor if you need language services during your visit or stay by calling 850.675.8212.

Interpreter services are available to you at no cost.



SPANISH

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1.850.675.8212.

FRENCH CREOLE

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1.850.675.8212.

VIETNAMESE

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1.850.675.8212.

PORTUGUESE

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1.850.675.8212.

CHINESE

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1.850.675.8212。

FRENCH

ATTENTION: Si vous parlez français, des services d'aide linguistique-vous sont proposés gratuitement. Appelez le 1.850.675.8212.

TAGALOG

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1.850.675.8212.

RUSSIAN

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1.850.675.8212.

ITALIAN

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il número 1.850.675.8212.

GERMAN

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1.850.675.8212.

KOREAN

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1.850.675.8212. 번으로 전화해 주십시오.

POLISH

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1.850.675.8212.

GUJARATI

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિઃશુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1.850.675.8212.

THAI

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1.850.675.8212.

ARABIC

تدعاسملا تامدخ نإف ؁ ةغلل ركذا تكدحت تنك اذا ؁ ةظوحلم
مقرب لصتا 1.850.675.8212. ناجملاب كل رفاوتت ةيوغللا
مكبل او مصلا فتاه مقر:





ABOUT YOUR STAY

YOUR PRIVATE ROOM

We want you to be happy with your room while staying with us. A hospital is the last place you want to be, but if you need that level of care, you want rest, quiet and privacy.

PERSONAL ITEMS

You are encouraged to bring your own sleepwear, robe, rubber-soled slippers and personal care items when you are admitted.

Be extremely careful with small personal items such as glasses, dentures and hearing aids. Keep them in your nightstand when they are not in use. Never wrap dentures or rings in tissue or a washcloth, and do not put them on your meal tray. They may accidentally be thrown away. Ask your nurse for a denture cup. Rings and other valuables should be sent home or put in the hospital safe until your discharge.

VALUABLES

If you have valuable items with you, we encourage you to send them home with a family member. Please do not leave them in your room. If, however, you have no choice but to keep the items with you, Jay Hospital can store your valuables securely. Patient care team members will help you store your small items if necessary. It is important to note that Baptist Health Care is not responsible for your valuables.

PATIENT MEALS

Proper nutrition is an important part of the healing process. With that in mind, your physician will prescribe a diet plan for you. We will make every effort to meet your needs while remaining within the guidelines of that plan. A nutrition clerk will visit daily to assist with your meal choices. Each meal will have two options. If the standard options are unacceptable, there are alternative selections available. Please understand, due to patient safety and ensuring the diet plan is followed, we discourage bringing outside food into the hospital. If you choose to have personal food brought in, Jay Hospital cannot store it.

PATIENT MEAL TIMES

- Breakfast: 7 a.m.
- Lunch: Noon
- Dinner: 5 p.m.

After hours, light snacks and drinks are available on each unit.

PATIENT DELAYED MEALS

We will ensure you receive a meal as quickly as possible after your prescribed diet plan is ordered. If you miss the nutrition clerk due to tests or other procedures, please call ext. 8045, and we will assist you with your menu selections.

NUTRITION CONSULTS

A registered dietitian is available to see you either by physician's order or at your request. Please notify your nurse if you wish to speak with a dietitian.

TELEPHONE SERVICE

Telephones are provided in all rooms for local calls. If patients do not wish to be disturbed, they can ask their nurse to turn off the phone.

LOCAL CALLS

Dial 9 plus the number.

Local calls can be made from the room at any time.

INCOMING CALLS

Family and friends can call directly into the patient's room by dialing 850.675.8(room number).

CELLULAR PHONES

Cell phones and other wireless communication devices are permitted in areas where they will not interfere with medical equipment. Communication devices are not allowed in operating rooms, radiology and the laboratory. Signs are posted in areas where cell phones are prohibited.

TELEPHONE DIRECTORY

Administration	850.675.8015
Admissions/Registration	850.675.8201
Jay Hospital Main Number	850.675.8000
Business Office	850.675.8020
CPR Education	850.434.4641
Radiology	850.675.8053
Dietary/Nutrition Services.....	850.675.8045
Emergency Room	850.675.8063
Patient Complaints.....	850.675.8015
Laboratory	850.675.8029

WAITING ROOM PHONE NUMBERS

For waiting room numbers, dial 0 for the operator. From outside the hospital, call 850.675.8000

Hospital Operator — 850.675.8000

From outside the hospital, call the operator to reach four-digit extension numbers.

WI-FI

Baptist Health Care has antennas deployed system-wide to accommodate Wi-Fi services at most facilities. Web users can access the internet from almost anywhere within the Baptist Health Care system. Simply log in as a "Guest" when accessing the internet from one of our campuses. The Guest network is a public Wi-Fi network provided free of charge to patients, visitors and contractors.

TELEVISION SERVICE

Television service is provided free of charge as a courtesy of Jay Hospital. Please be considerate of other patients by playing your television as quietly as possible and remembering to turn off your set at bedtime. If you have any problems with your television, please notify your nurse.

TELEVISION CHANNEL LISTING

2	ABC	32	Oxygen
3	CBS	33	TLC
4	PBS	34	Paramount
5	FOX	35	SYFY
6	NBC	36	Food
7	CW	37	Lifetime
8		38	Hallmark
9	MeTV	39	HGTV
10	Weather	40 ...	TV Land
11	News Station	41	Freeform
12	ESPN-SEC	42	Travel
13	ESPN	43	TruTV
14	ESPN-2	44 ...	Comedy
15	Fox Sports	45	E!
16	FXX	46 ...	Disney
17	FS1	47	Nick
18	Fox Business	48 ...	Cartoon
19	Fox News	49	Animal Planet
20 ...	CNN	50	Discovery
21	HLN	51	MTV
22	CNBC	52	VH1
23	NSNBC	53	IFC
24	History	54	BET
25	TNT	55	I.D
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NURSE BEDSIDE SHIFT REPORT

The nurse bedside shift report is when the nurses going off and coming on duty meet by your bedside to talk about your care. This gives you a chance to meet the nurse taking over your care, ask questions and share important information with your nurses. The nurse bedside shift report does not replace the conversations you have with your doctor.

You can invite a family member or friend to stay during nurse bedside shift report. We will only talk about your health with others when you say it is OK.

WHEN IS NURSE THE BEDSIDE SHIFT REPORT?

Shift report occurs between 7 and 7:30 a.m. and 7 and 7:30 p.m. and is brief, as the nurses round on all patients during this 30 minute time frame.

WHAT SHOULD I EXPECT?

During the nurse bedside shift report, the nurses going off and coming on duty will:

- **Introduce themselves to you and anyone with you.** The nurse coming on duty will write his or her name and phone number on the white board in your room.
- **Invite you to take part in the nurse bedside shift report.** You should decide who else can take part with you.
- **Talk with you about your health,** including the reason you are in the hospital and what is going on with your care. The nurses will look at your medical chart.

- **Check the medicines you are taking.** The nurses will look at your IVs, injuries and bandages. They will also follow up on any tests that were done or lab work that was ordered.
- **Ask you what could have gone better** during the last shift and what you hope to do during the next shift. For example, you may want to get out of bed or just sleep. The nurse will try to help you meet this goal.
- **Encourage you to ask questions and share your concerns.** If needed, the nurse coming on duty may come back after the bedside shift report to spend more time discussing your concerns.

WHAT SHOULD I DO?

- **Listen.** You are an important part of the health care team. We want to make sure you have complete and timely information about your care.
- **Speak up.** If you have questions or concerns, the nurse bedside shift report is the perfect time to raise them.
- **Ask questions if something is confusing.** If the nurses use any words or share any information you don't understand, feel free to ask them to explain it.

WE WANT TO MAKE SURE THAT YOU RECEIVE THE BEST CARE POSSIBLE.

If you have any concerns about the quality or safety of your care during your hospital stay, please let your nurse or doctor know.

If you are still concerned, call the house supervisor at 850.675.8212.

If the nurse bedside shift report does not happen, ask to speak with the nurse supervisor on duty.

Being a partner in your care helps you get the best care possible in the hospital. Taking part in the nurse bedside shift report is one way you can be a partner.



FOR YOUR COMFORT

PASTORAL SERVICES

We understand that being hospitalized can be a very stressful time for both patients and their families, and we are concerned about meeting your emotional and spiritual needs.

At your request, we will be glad to notify your pastor or minister when you are admitted. If you would like to speak with a chaplain or if you have any special needs, please ask the patient care team members, and we will do our best to contact a local chaplain.

PRAYER ROOM

A prayer room is located in the main lobby of the hospital and is open at all times for prayer and meditation. All faiths and denominations are welcome.

HOUSES OF WORSHIP

Jay First Baptist Church – 14113 Alabama St.
850.675.4587

Jay United Methodist Church – 14093 Alabama St.
850.675.4882

Cornerstone Christian Church – 14047 Alabama St.
850.675.6869

Jay Church of Christ – 4034 Highway 4
850.675.6443

Cora Baptist church – 12953 Chumuckla Hwy
850.675.4264

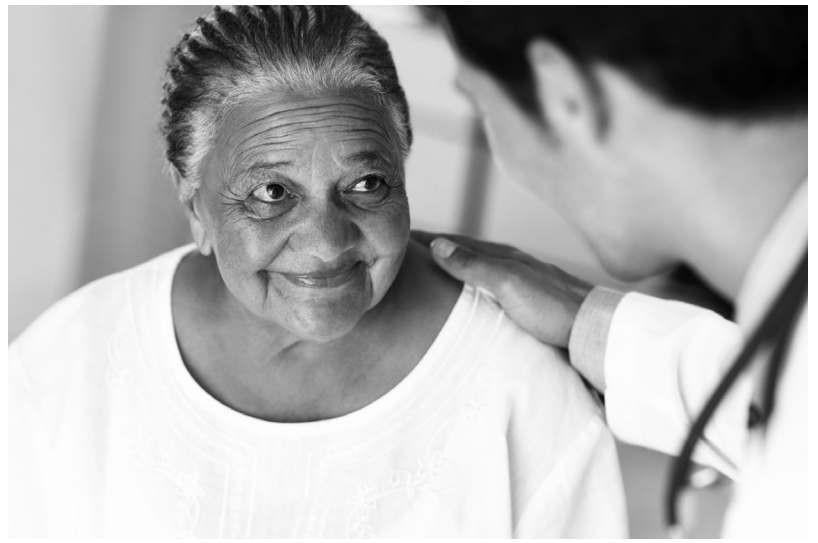
Mount Carmel United Methodist Church
4650 Mt. Carmel Rd.
850.675.6228

ENVIRONMENTAL SERVICES

We service your room several times a day. The following is a list of duties your housekeeper provides:

- Empty trash
- Damp wipe with disinfectant touch points such as door handles, light switches, telephone receiver, bed rails, tray table and nurse call/TV remote
- Clean and sanitize restroom
- Replenish toilet tissue, paper towels, soap and hand sanitizer
- Sweep and mop floor

If you need assistance with any of these items, please call ext. 8208 or ask one of the clinical team members to contact EVS.



PAIN MANAGEMENT

Baptist Hospital supports and respects each patient's right to pain management, and our goal is to help you recover safely and quickly. Unfortunately, pain is common with illness and can be expected after surgery. Everyone experiences pain differently. Please talk openly with your health care team members so they know what hurts and how much it hurts so that we can respond appropriately. Successful pain management may not eliminate all of your pain, although the goal is to control your pain enough so that you can rest and do activities to help you recover. There are a variety of options for reducing pain including relaxation techniques, applying cold or heat, listening to music, massage, physical therapies, oral and topical medications, and other measures (please ask your team member for additional information). While most pain is physical, we also recognize that pain and discomfort can be mental, emotional or spiritual, which we also want to help manage. We have social workers, chaplains and other health care professionals who are trained to address and assist in dealing with difficulties or hardships you may experience.

You have the right to treatment of your pain during all parts of your care. We will ask you to rate your pain using the pain scales on the next page. Based on the rating, and being careful that treatment does not interfere with your recovery, we will treat your pain with pain medications and/or comfort measures.

DO:

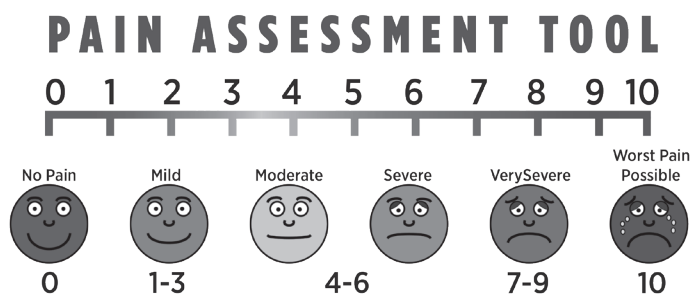
- Tell your nurse when pain first begins.
- Tell your nurse how your pain feels.
- Tell your nurse if your pain is not relieved.
- Tell your nurse if you have any worries about taking pain medicine.
- Call for assistance before getting up after you have received pain medication.

DON'T:

- Drink alcohol while taking pain medication.
- Take medicine, herbal extracts, stimulants or other

medicines not authorized by your doctor while taking pain medications.

- Take street drugs.
- Wait until your pain is unbearable before telling your nurse.



SAFETY AND SECURITY

Your safety is very important to all of us at Jay Hospital, and we are working to make your stay with us a positive experience. You, as the patient, also can play a vital role in making your care safe by becoming an active, involved and informed member of your health care team. You are the center of the health care team. To help you stay involved, you are urged to consider the following:

INFORMED CONSENT

Read and understand any consent forms you are requested to sign. Ask questions! If you have concerns or are not sure what is being planned, you should ask your nurse, physician or another member of your health care team. Speak up. If you have questions or concerns or don't understand, ask again. You have the right to know and question all aspects of your care.

SMOKING POLICY

As a health care organization, Baptist Health Care recognizes the hazards of smoking and second-hand smoke.

To create a healthy environment for everyone who visits our campuses, Baptist Health Care is "smoke free."

Smoking and second-hand smoke have the potential to impact treatment, including slowing medication absorption and healing. If you have concerns, please talk with your physician. Patients wanting to smoke can be provided with nicotine replacement therapy.

Please help us support an environment of healing as well as a healthier community.

IDENTIFICATION

Expect team members to introduce themselves. Look at their identification badges. If they don't introduce themselves, ask who they are and what their role is in your care plan.

A wrist identification band will be given to you when you are admitted. Check the information on it to make

sure it is correct. This will be used to positively identify you before you are given any medications, tests or procedures. If the band comes off or becomes illegible, notify a member of your health care team so it can be replaced immediately. At Jay Hospital, we use two patient identifiers, your full name and your date of birth. Your health care team will ask you for this information many times during your stay; please help us keep you safe by providing this information each time.

If you have an allergy, please inform a team member during the admitting process or tell a member of your health care team.

SPEAK UP AND SHARE YOUR CONCERNS

Everyone has a role in making health care safe – including physicians, nurses, other health care staff and patients. Being an active and involved member of your health care team is an important way to make your care safer.

MEDICATIONS

Please create a list of all medications you currently take and bring it with you when you are admitted to the hospital. Make sure to include any over-the-counter medications, herbal supplements and vitamins. Reactions from mixing medications are a major cause of illness, so knowing what you take will help your team provide better care. Ask for information about your medicines in terms you can understand – both when your medicines are prescribed and when you receive them. If you bring medications from home, give these medications to your nurse. Your physician will be prescribing medications and closely monitoring their effects. It is important that you do not take any medications (including over-the-counter medications such as aspirin or Tylenol) unless these are prescribed by your doctor and given to you by your nurse. This is for your safety and to prevent possible adverse drug reactions. Please don't ignore this regulation. It could save your life.



Speak up if you think you are about to receive the wrong medication. Know your medications and when you should get them. You should be told about side effects that you may experience and why you are taking the medication. If you do not recognize a medication that you are given, ask the nurse to verify. If you are allergic to any medications, make sure that the nurse and doctor are aware.

MEDICATION SAFETY

- Remember to ask your nurse about side effects for each medication that you are receiving.
- Know the difference between a side effect, an adverse reaction and allergies to medication.
 - **Side effects** – usually regarded as an undesirable effect which occurs in addition to the desired therapeutic effect of a drug or medication. When side effects of a drug or medication are severe, the dosage may be adjusted or a second medication may be prescribed. Lifestyle or dietary changes may also help to minimize side effects.
 - **Allergies** – a group of symptoms caused by an allergic reaction to a drug or medication. Allergic reactions can range from irritating or mild, such as nausea and vomiting, to life-threatening.
 - **Adverse reactions** – refer to any injury caused by the drug (at normal dosage and/or due to overdose) and any harm associated with the use of the drug.
- Always carry a current medication list with you.
 - List all your medications, including over-the-counter ones such as Tylenol or aspirin; include vitamins, herbal supplements and birth control pills.
 - List all your allergies and document the reaction you experience from each allergen.
- Before taking any medication, ask your nurse, “What is this medication and why is my doctor ordering it for me?”
- Tell your nurse if a medication looks different than what you usually take.
- Make sure your nurse asks your name and date of birth, or checks your arm band, before giving you medications.

ANTICOAGULATION DRUG INFORMATION

I. ANTICOAGULANT MEDICATION

An anticoagulant is a drug that interferes with the normal clotting of blood. It can prevent an existing clot from increasing in size, thereby preventing a heart attack or stroke. It is sometimes called a “blood thinner.”

This is not really a correct term since the blood does not become thinner; it simply takes longer to clot. These drugs do not break up the clot but stop it from getting bigger or new clots from forming. They do this by reducing the amount of clotting factors. There are two types of anticoagulants: one is heparin, which is given by injection, usually at the beginning of treatment in the hospital; and the other is an oral anticoagulant, taken by mouth.

II. WHY IT IS USED

Anticoagulants are often used to prevent blood clots from forming in the heart during or after a heart attack. Anticoagulants also may be given after angioplasty or other revascularization procedures. Heparins are often combined with aspirin and other antiplatelet medications (such as tirofiban [Aggrastat]) to help reduce the risk of heart attack and death in people who have unstable angina.

III. WHO NEEDS ANTICOAGULATION THERAPY?

The four most common conditions for which anticoagulant therapy is prescribed are atrial fibrillation, deep vein thrombosis, pulmonary embolism and mechanical heart valves.

- **Atrial fibrillation** is a common heart disorder that causes an irregular heartbeat that can lead to complications including blood clots.
- **Deep vein thrombosis** is a condition in which blood clots form in the deep blood vessels of the legs and groin. These blood clots can block the flow of blood from the legs back to the heart.
- **Pulmonary embolism** is a condition in which the bloodstream carries a piece of a blood clot from another location to a vessel in the lungs.
- **Mechanical heart valve replacement:** Sometimes a person has a heart valve that is damaged and needs to be replaced. If it is replaced with a mechanical valve made of man-made substances, the body recognizes it as a foreign object and attempts to protect the body against it.

IV. SAFETY TIPS WHEN TAKING ANTICOAGULANTS

- Take the medication at the same time each day as instructed by your doctor.
- Check with your doctor before using nonprescription drugs, especially ones that contain aspirin or other nonsteroidal anti-inflammatory drugs (such as ibuprofen or naproxen).
- Talk to your doctor before taking any vitamins, supplements or other natural products.
- Tell new health professionals that you are taking medication that affects how your blood clots.
- Talk to your doctor about how often you should have blood tests.



- Be alert for signs of bleeding. Call the doctor immediately if any of the following symptoms occur:
 - Blood in urine or red or tarry stools
 - Bleeding from the nose or gums or spitting up blood
 - New, excessive or prolonged vaginal bleeding
 - Frequent, severe bruising or tiny red or purple spots on the skin.

IF YOU TAKE WARFARIN (SUCH AS COUMADIN):

- Get regular blood tests to ensure that you are taking the right amount of medication.
- Eat a balanced diet. Don't suddenly change your intake of vitamin K-rich foods, such as broccoli, Brussels sprouts, cabbage, asparagus, lettuce, spinach and some vegetable juices. It is most important to maintain a consistent level of vitamin K in your diet. Vitamin K can interfere with the action of warfarin, making it more likely that your blood will clot.
- Avoid excessive use of alcohol. If you drink, do so only in moderation. Alcohol may increase the effect of warfarin.

- Don't use tobacco of any kind.
- If other doctors prescribe medicines for you, tell them that you are taking warfarin. Talk to your doctor before taking any vitamins, supplements or other natural products. Do not take ginkgo biloba or garlic supplements while using warfarin.
- Avoid activities that have a high risk for injury, such as skiing, football or other contact sports. If you are taking warfarin, an injury could result in excessive bleeding.
- Wear a seatbelt anytime you are traveling in a car.

PREVENTING MINOR BLEEDING WHILE TAKING ANTICOAGULANTS

You may find it helpful to use the following items to lower the risk of bleeding:

- An electric razor
- A soft-bristled toothbrush and waxed floss
- Protective clothing, such as gloves and shoes
- Nonslip mats in the tub and shower

WHAT TO DO IF YOU MISS A DOSE OF ANTICOAGULANT

- If you remember in the same day, take the missed dose. Then go back to your regular schedule.
- If it is the next day, or almost time to take the next dose, do not take the missed dose. At your next regularly scheduled time, take your normal anticoagulant dose.
- If you miss your dose for two or more days, call your doctor.
- Do not double the dose in any one day to make up for a missed dose.
- Call your doctor if you are not sure what to do if you missed a dose.



POSSIBLE SIDE EFFECTS OF MEDICATION

MEDICATION	SIDE EFFECTS	YOUR MEDICATION
Analgesics (Pain Medication) This medication is used to help relieve pain.	Nausea and/or vomiting, constipation, light-headedness, sleepiness, blurred vision, dry mouth	
Antibiotics This medication is used to treat infections or possible infections.	Nausea, vomiting, diarrhea, rash, headache	
Anticoagulants (blood thinner) This medication is used to treat existing blood clots or prevent the formation of blood clots.	Bleeding, headache, nausea, vomiting	
Anticonvulsants (seizure medication) This medication is used to prevent or treat seizures.	Drowsiness, blurred vision, dizziness, light-headedness, diarrhea, muscle weakness	
Antidepressants This medication is used to make you feel better by improving your mood.	Nervousness, loss of appetite, sleepiness or inability to sleep, dizziness or weight gain	
Antiemetics/Antihistamines These medications are used to treat nausea and/or vomiting and allergy symptoms like itching.	Headache, constipation, weakness, dry mouth, dizziness, sleepiness	
Antihypertensives (blood pressure) This medication is used to lower blood pressure.	Dizziness, light-headedness, cough, nausea, vomiting, a feeling of being tired	
Anti-inflammatory This medication is used to reduce inflammation or relieve pain.	Stomach pain/heartburn, headache, dizziness, ringing in the ears, tendency to bleed more	
Cholesterol Reducing Medication This medication is used to reduce harmful types of cholesterol and triglycerides; it can also slow the progression of heart disease.	Headache, diarrhea, stomach pain, muscle weakness, joint pain	
Diabetes These medications are used to control blood sugar.	Oral - abdominal pain, diarrhea, nausea, vomiting, low blood sugar Insulin - low blood sugar, weight gain, nausea, vomiting	

POSSIBLE SIDE EFFECTS OF MEDICATION continued ...

MEDICATION	SIDE EFFECTS	YOUR MEDICATION
Diuretics (water pill) This medication is used to help remove excess fluid from the body; it may also lower blood pressure.	Dizziness, stomach pain, nausea, vomiting, constipation, increased voiding (passing urine)	
Heart Medications This medication is used to treat irregular heart beats and/or improve the function and strength of the heart.	Chest pain; slow/fast/bounding heart beat; swelling of feet, ankles or hands; shortness of breath; blurred vision; unusual bleeding or bruising; cough	
Mood Stabilizers/Neuroleptics/Tranquilizers This medication is used to even out mood swings and stabilize behavioral or mental conditions.	Sleepiness, inability to sleep, blurred vision, nausea, vomiting, headache, diarrhea, weight gain, dizziness, nervousness, agitation, shakiness, increased blood sugar	
Respiratory Medication This medication is used to help you breathe better.	Nervousness, nausea, vomiting, dry mouth, increased blood pressure	
Sedatives/Antianxiolytics (Sleeping pills/nerve pills) This medication is used to help you sleep or treat anxiety.	Sleepiness, light-headedness, blurred vision, changes in balance, dry mouth, constipation	
Stomach Medications This medication is used to treat problems with the stomach or intestines.	Headache, dizziness, diarrhea	

Understanding your medications and possible side effects is very important for your safety.

That is why we always take time to review this information with you.

If you have any questions, please ask your nurse for assistance.

If you experience any side effects, notify your doctor or nurse immediately.

ELECTRICAL

It is the policy of Jay Hospital that all patients will be provided an environment free of electrical hazards. The use of unsafe, faulty electrical equipment could cause fire, shock hazards, tripping hazards or unintentional circuit overloads. You may want to bring entertainment, grooming or other electrical appliances into the hospital. Certain devices are permitted, but the following rules must be followed to ensure your comfort and safety, as well as that of all of our patients. Inform a member of your health care team if you have an electrical device. All such items should be inspected by the hospital plant operations department to ensure compliance with the hospital's electrical safety policy. The following devices are prohibited: extension cords, heating pads or heating devices of any kind, including space heaters, heating blankets, curling irons, coffeepots and coffeemakers. Electric shavers and hair dryers are generally permitted. All line-powered devices (plug into an outlet with a cord) must be UL Listed and have an Underwriter's Laboratories (UL) label. Line-powered devices must be in safe condition without evidence of wear, deterioration or repairs. They must be unplugged while not in use. Small battery-powered devices, such as clocks, radios and music players not including battery-chargers, are generally permitted. We encourage the use of earphones with electronic devices. Please do not use devices that disturb other patients. Never use your electrical appliance around water, and be careful to keep all cords away from traffic areas. If you notice any hospital electrical equipment that does not work properly (television, lights, etc.), please call your nurse. Permission to use a device, even if that device has been inspected by hospital personnel, is not a guarantee of safety. The hospital assumes no responsibility for any death, injury, damage, theft or other loss associated with any device brought into the hospital by a patient or visitor.

PREVENTING FALLS

At Jay Hospital, our goal is to make your hospital stay as safe and pleasant as possible. To meet this goal, we have developed a fall prevention program that includes identification of patients at risk for falls and steps to prevent falls.

Patients who have certain illnesses, physical limitations, weakness or other medical conditions that increase the risk of falls will be identified by the placement of a yellow tab on your ID band. This tab alerts everyone involved in your care throughout the hospital that you are at risk to fall.

We need your help to safeguard against falls. Please follow these guidelines while you are in the hospital:

- Ask the nurse or physical therapist if you can be out of bed or go to the bathroom alone. Please follow their instructions for your safety.

- Ask for help before getting out of bed if you feel dizzy, weak or if you need help managing IV poles or other equipment.
- Tell the doctor or nursing team members if you have a history of falls.
- Wear non-skid slippers when getting out of bed. If you do not have these, ask the nursing team members; they will be happy to provide you with a pair of non-slip socks.
- Use the call bell in the bathroom if you need assistance getting back to bed.
- Certain medication may increase your risk of falling. Ask your nurse how your medications will affect you with each new medication ordered.
- Keep your call light within reach.
- Keep your bed in the lowest position when getting in or out.
- Do not try to climb over or around side rails.
- Do not hold onto or lean on bedside trays or chairs – these items may not be secure enough to hold your weight or may move unexpectedly.
- Request a bedside commode if you feel you need one.
- Don't let fear of embarrassment cause you to hurry to the restroom and risk a fall.
- Use your walker or cane if you have one.
- Do not try to get up without help if you cannot walk safely with your IVs or tubes.
- Ask your family to notify the nurse when they leave if you are at risk for falls.
- Keep your room free from clutter and obstacles. Keep the lights on when out of bed.

INFECTION PREVENTION

A hospital is a place with many sick people. It is important to prevent the spread of germs and infections. Inside or outside a hospital, good hand hygiene is the best way to stop the spread of germs and infections. You and your family can help us control germs by following these rules:

- Follow cough etiquette by covering your mouth when coughing and sneezing, coughing into your sleeve, throwing away tissue after use and keeping a distance from others, if possible.
- Use antiseptic hand sanitizer. Rub in for 15 seconds and air dry hands if not visibly soiled.
- Wash your hands often and always after using the restroom, sneezing or coughing, and before eating.
 - Use warm water to wet hands.
 - Dispense soap and thoroughly lather.
 - Wash hands for at least 15 seconds (sing Happy Birthday to yourself).
 - Rinse hands thoroughly.
 - Dry hands completely and use paper towel to turn off faucet.

- Caution family not to bring children or come in to visit while they are experiencing any symptoms of colds, flu, COVID-19, vomiting or diarrhea.
- If you are placed on isolation during your hospitalization, this means you may have a sign and a cart placed outside your door alerting visitors and staff entering your room to take special precautions needed in order to protect you and others. Caution family members to check with the nurse regarding visitation and appropriate visitor precautions.
- If you have a urinary catheter, ask each day if it is necessary.
- Be sure everyone cleans their hands before touching you. Clean hands save lives.
- Ask staff if they have washed their hands. We have a “100% yes” culture if you ask us to wash our hands.
- Tell your doctor if you have three or more diarrhea episodes in 24 hours, especially if you have been taking an antibiotic.
- Get vaccinated against flu and other infections to avoid complications.
- If you have an IV, let your nurse know if there is redness at the insertion site.
- If you have a central line, do not touch it! The dressing should be clean and dry. Let your nurse know if it’s not. Ask your nurse to explain “scrub the hub.”
- Daily bathing helps prevent the spread of infection.

SKIN CARE AND PRESSURE INJURIES

WHAT ARE PRESSURE INJURIES?

A pressure injury is an injury that is caused by unrelieved pressure that damages the skin and underlying tissue. Pressure injuries are also known as “bed sores” and range in severity from mild (minor skin reddening) to severe (deep craters down to muscle and bone). Pressure injuries are serious problems that can lead to pain, a longer stay in the hospital and a slower recovery from health problems. Anyone who must stay in a bed, chair or wheelchair because of illness or injury is at risk of developing a pressure injury.

Unrelieved pressure on the skin compresses tiny blood vessels, which supply the skin with nutrients and oxygen. When skin is starved of nutrients and oxygen for too long, the tissue dies, and a pressure injury forms. Skin reddening that disappears after pressure is removed is normal and not a pressure injury.

Nerves normally tell the body when to move to relieve pressure on the skin through the sensation of pain. Persons in bed who are unable to move may get pressure injuries after as little as 1-2 hours. Persons who sit in chairs and who cannot move can get pressure injuries in even less time because the force on the skin is greater.

Other factors can contribute to the formation of pressure injuries. If a person slides down in the bed or chair, blood vessels can stretch or bend and cause skin damage. Even

slight rubbing or friction on the skin may cause damage. Patients who are frequently incontinent of bowel and/or bladder may have overly moist skin, which will cause the skin to become fragile and damaged.

WHERE DO PRESSURE INJURIES FORM?

Pressure injuries typically form where bone causes the greatest force on the skin and tissue and squeezes them against an outside surface. This may be where bony parts of the body press against other body parts, a mattress or a chair. In persons who must stay in bed, most pressure injuries form on the lower back below the waist (sacrum), the hip bone (trochanter), and on the heels. Pressure injuries can form anywhere, but other common locations include on the knees, ankles, shoulder blades, back of the head and spine.

YOUR RISK

Confinement to a bed or chair, being unable to move, loss of bowel or bladder control, poor nutrition, lowered mental awareness and diminished sensation are some common risk factors that increase your chance of developing a pressure injury.

1. Bed or chair confinement – If you must stay in the bed, chair or wheelchair, the risk of getting a pressure injury can be high because you can unintentionally apply prolonged pressure to skin.
2. Inability to move – If you cannot change positions without help, you are at a greater risk of developing a pressure injury. Persons who are in a coma, who are paralyzed or who have a hip fracture are at an especially high risk. When you cannot change positions on your own, you may be exposing your skin to prolonged and excessive pressure.
3. Loss of bowel and bladder control – If you cannot keep your skin free of urine, stool or perspiration, you have a higher risk of developing a pressure injury. These sources of moisture may irritate and weaken the skin.
4. Poor nutrition – If you cannot eat a balanced diet, your skin may not be properly nourished. Pressure injuries are more likely to form when the skin is not healthy.
5. Lowered mental awareness – When mental awareness is lowered, a person may not be aware of their risk and cannot act to prevent pressure injuries. Mental awareness can be affected by health problems, medications and anesthesia.
6. Diminished or absent sensation – Some patients, specifically those who are paralyzed, may not be able to feel when they are exposed to prolonged pressure. Because they cannot feel the pain sensation associated with pressure, they do not know to relieve that pressure.

Fortunately, you can lower your risk. The following steps are based on research, professional judgement and practice. These steps can also keep pressure injuries from getting worse. Talk to your nurse or doctor about which steps are right for you.

PROTECT YOUR SKIN FROM INJURY

Your skin should be thoroughly inspected at least once a day. Pay special attention to any reddened areas that remain after you have changed positions and the pressure has been relieved. This inspection can be done by yourself or your caregiver. Pay special attention to bony areas or pressure points. The goal is to find and correct problems before pressure injuries form.

Limit pressure over bony parts of your body by changing positions or having your caregiver shift your position frequently. If you are in bed, your position should be changed at least every two hours. If you are in a chair, your position should be changed at least every hour. Wedge pillows may be used to reposition and stabilize you.

Reduce friction (rubbing) by making sure you are shifted, rather than dragged, during repositioning. Friction can rub off the top layer of skin and damage blood vessels under the skin. If nurses or others are helping to shift you, bed pads can be used to reduce friction.

Minimize moisture from urine, stool, perspiration or wound drainage. Bed pads that absorb fluids and have a quick drying surface that keeps moisture away from the skin should be used. A barrier cream or ointment to protect skin from urine, stool or wound drainage may be helpful.

A special air mattress can be used in place of the regular bed mattress to prevent pressure injuries. These mattresses not only provide an alternating air pressure pattern, but can assist with temperature and moisture control of the skin. Talk to your health care provider to see if an air mattress would be best for you.

If you are unable to reposition your legs adequately, the nursing staff may “float” your heels off the mattress using pillows or special boots. The purpose of this is to completely elevate your heels off the mattress to prevent excessive pressure to the area.

Avoid the use of donut-shaped cushions. Donut-shaped cushions can actually increase your risk of getting a pressure injury by reducing blood flow to the surrounding skin and causing tissue to swell.

Avoid massage of your skin over bony parts of the body. Massage may squeeze and damage the tissue under the skin and make you more susceptible to pressure injuries.

The head of the bed should be raised as little and for as short a time as possible consistent with medical conditions and restrictions. When the head of the bed is raised more than 30 degrees, your skin may slide over the bed surface, damaging skin and tiny blood vessels.

Eat a balanced diet. Protein and calories are very important to maintaining skin health. Healthy skin is less likely to be damaged. If you are unable to eat a normal

diet, talk to your health care provider about nutritional supplements that may be desirable.

BE ACTIVE IN YOUR CARE

The best way to prevent pressure injuries is to be an active member in directing your care. Be sure you ask questions; explain your needs, wants and concerns; understand what and why things are being done; and know what is best for you. Talk to your health care providers about what you can do to help prevent pressure injuries. *You can help to prevent most pressure injuries. The extra effort can mean better health.*

ADDITIONAL RESOURCES

National Pressure Ulcer Advisory Panel (NPUAP)

A non-profit professional organization dedicated to the prevention and management of pressure injuries through public policy, education and research. npuap.org

Agency for Healthcare Research and Quality (AHRQ)

The federal agency that conducts research on health care quality issues, health care costs and patient safety. Their mission includes translating research into better patient care. ahrq.gov

National Guideline Clearinghouse

A public resource for evidence-based practice guidelines. guideline.gov





FOR YOUR VISITORS

AN IMPORTANT MESSAGE FOR OUR VISITORS

Visits from family, friends and clergy are essential to the healing process. For that reason, we offer open visitation hours. For visits between the hours of 9 p.m. and 6 a.m., please check in at the emergency department entrance. Also, during the overnight hours, visitors are asked to enter and exit through the emergency department. Please help us maintain a safe and restful environment for patients and visitors by honoring the following requirements:

JAY HOSPITAL

Due to skilled nursing within the hospital, caregivers/support persons are permitted under strict guidelines and must check in at the nurse's station upon arrival. Call 850.675.8216 for details. Two visitors are allowed. More visitors may be appropriate in circumstances such as comfort care. One visitor per patient is allowed in the emergency department. Any exceptions can be discussed with the nursing team.

SAFETY GUIDELINES

To protect the safety of patients, visitors and team members, we offer the following infection prevention practices for all visitors:

- Visitors must be free from fever, cold, sore throat, upper respiratory infection or other contagious diseases.
- Only one visitor at a time is allowed in rooms of patients who are positive for COVID-19 or who are waiting for COVID-19 test results unless an exception has been made for extenuating circumstances.
- All children under the age of 16 must be accompanied by an adult at all times.

- Children who are visiting cannot have been exposed to chicken pox, measles, rubella or mumps within the past three weeks.
- Hand washing/sanitizing when entering and leaving a room is required.
- All visitors must review applicable personal protective equipment (PPE) when posted on or about a patient's doorway and wear PPE when requested.

HEALTH REQUIRES REST AND RECUPERATION

- To avoid tiring patients, we ask that visitors limit the length of their visit as well as the number of people visiting at one time. The number of visitors in a patient room should generally not exceed two at a time.
- Although every effort is made to allow open visitation, it may be necessary to restrict visitation temporarily. At a minimum, patients may designate a patient representative (family member or friend) who may visit the patient in person for at least two hours each day during designated visitation hours. Any restrictions to this visitation will be explained by the patient's treatment team.
- To prevent disturbing other patients, we ask that all visitors be as quiet as possible. If you are wearing hard-soled or high-heeled shoes, please walk quietly and keep voices down while in the hallway.
- Patient care must remain a priority. Upon request by a Baptist workforce member, visitors may be asked to leave the patient room. This may be necessary when personal and emergency care is provided; invasive procedures are being performed; or the patient requires uninterrupted rest time.

GUEST TRAYS

Guest trays are available when caregivers are unable to leave for a meal. If you are unable to make it to the cafeteria, please call ext. 8045, and a dietary team member will assist you.

JAY HOSPITAL CAFETERIA

Hot food meal specials are available daily.

Hours of operation are:

7 to 9 a.m. Breakfast

11 a.m. to 1 p.m. Lunch
(Lunch guests must sign up in the cafeteria prior to 10 a.m.)

5 to 6 p.m. Dinner

VENDING MACHINES

Food and beverage vending machines are located in the waiting rooms on each floor.

AUTOMATIC TELLER MACHINE

For your banking convenience, an ATM is located in the front lobby.

PATIENT AND GUEST PARKING

Free parking for patients and visitors is available 24 hours a day, seven days a week.

FINDING YOUR WAY AT JAY HOSPITAL

If you need assistance in finding your way to your desired location, please ask a team member for help.

DISCHARGE INFORMATION

You will receive written discharge instructions prior to leaving the hospital. The nurse will give you these instructions in writing. Ask questions if you do not understand. Have a family member present to help recall what was said.

Make sure you can read the handwriting on any prescriptions or papers given to you by your health care team. Take notes, and specifically find out when to see the doctor again, what medicines you should be taking at home, and whether or not you will be having someone come to your home for treatments or therapy. Once you get home, review the materials the doctor gave you. If you cannot remember something, or if you don't understand your notes, call the office and speak to a member of your health care team. If something is confusing or does not seem right, call your doctor's office for advice.

Follow your discharge instructions. Take the full course of any medications prescribed and make sure you follow the recommended diet or exercise routine. Follow up with your doctor on test results, reactions to medication, or any complications or worsening of your condition.

DISCHARGE PLANS

DISCHARGE INSTRUCTIONS: Patients who understand their discharge instructions are 30% less likely to be readmitted to the hospital or to visit the emergency department.

We strive to improve your understanding and provide you with a clear written discharge plan.

DISCHARGE PLANNING – YOU ARE ENCOURAGED TO:

- Educate yourself about your diagnosis – ask questions of your physician, therapist, nurse and case manager.
- Ask about after-care needs to prepare for your return home.
- Write down questions as they come up to remember what you want to discuss.
- Make your wishes known to your physician and other

health care workers. Advance directives specify your wishes in the event you are unable to make your decisions known. If you do not have an advance directive, one can be provided at your request.

- Read your discharge instructions and have a clear understanding of what is expected. Take the time to clarify anything that is confusing.

Ask to speak with a case manager or social worker to evaluate your needs for discharge planning. If you need continuing care, your doctor, nurse and case manager/social worker will work with you and your family to develop a special plan to meet your needs. Share with the case manager/social worker any concerns you have about your ability to manage your own personal care, your medications, housekeeping, caregiving duties, mobility and recovery needs once you are at home.

COMMON DISCHARGE NEEDS

Home Health Care

- Physical therapy / occupational therapy / speech therapy
- Nursing – IV antibiotics / TPN / wound care / injections / education

Home Medical Equipment

- Oxygen / walkers / nebulizers / glucometers / bedside commodes
- Wheelchairs / hospital beds – These items may require a letter of medical necessity from a physician.

Placement (There are specific guidelines for placement governed by patient needs and insurance coverage.)

- Skilled nursing / acute rehab / long term acute care
- It is important that you and your family select the optimal facility that meets your needs. Facility quality, location, clinical services and ability to accept your insurance are all factors that should be taken into account. Your care team is knowledgeable about facilities within the region and will be able to provide you with guidance as you make your choice.

Hospice (There are outpatient as well as residential hospice options.)

The above agencies/facilities may vary in the services they provide and the insurance providers that they accept.

Going Home: Before leaving the hospital, a nurse will review your discharge plan and instructions.

- Once your doctor writes the order for discharge, your nurse will explain the procedures, provide instructions for home care and answer any questions you may have.
- Ask your nurse the time you should expect to be discharged so that you can arrange for transportation home.
- Again, make sure you can read your discharge instructions and have a clear understanding of what is expected.

BILLING

Following your discharge from Jay Hospital, an itemization of charges will be sent to you. We will also submit a claim to your insurance company. Your insurance company will pay according to your specific benefit plan.

When you receive a statement, it will indicate "Patient Balance Due." This is payable upon receipt of the bill. The hospital bill does not include the fees charged by physicians or fees charged for professional services such as those of anesthesiologists, radiologists or pathologists. Each of these physicians will send a separate bill for their professional services.

PATIENT EXPERIENCE AND SATISFACTION SURVEYS FROM PRESS GANEY

At Jay Hospital, we strive to provide every patient with exceptional service during their stay. If you are experiencing problems in any area, please call and let us know so we can correct the problem. Following your stay with us, you may receive a survey by direct mail, email or text message from an independent surveyor, Press Ganey, asking about your experience today. Your confidential feedback will be used by Baptist Health Care to continually provide excellent patient care.



NEED A PHYSICIAN?

Call Baptist Medical Group. This network of doctors teamed together with Baptist Health Care to provide the absolute best in health care services for the community – the Greater Pensacola area. A trusted network of specialists and primary care physicians serve the communities of Pensacola, Pace, Perdido, Gulf Breeze, Navarre, Atmore, Jay and more. To learn more about our physicians, practices and specialties, visit baptistmedicalgroup.org or call 850.437.8600.

MEMBERSHIP PROGRAMS

GET HEALTHY PENSACOLA!

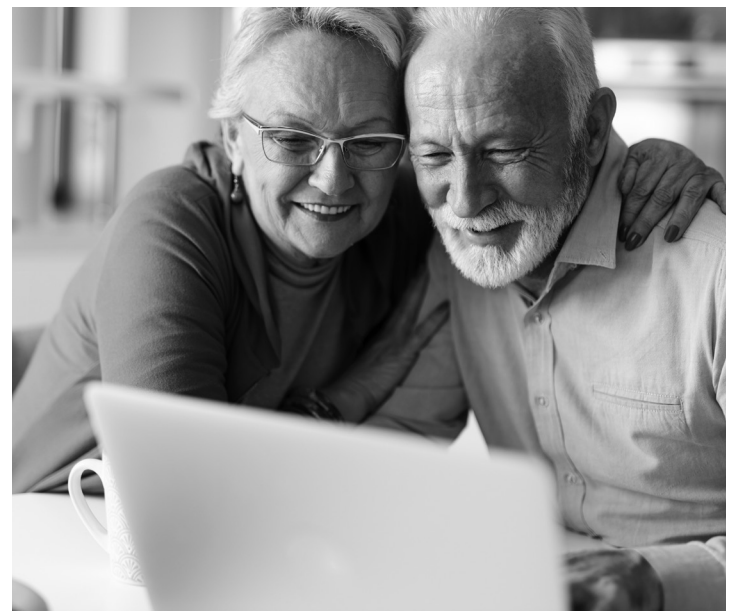
Get Healthy Pensacola! is a community-wide membership rewards program that encourages people to participate in healthy activities such as health screenings and exercise. Members receive a bimonthly wellness newsletter with a listing of the programs we are currently offering. Each month we provide programs at the various locations around town that help you stay focused on being healthy. Visit GetHealthyPensacola.com or call 850.469.2447.

GOLDENCARE

GoldenCare is a free community service program providing health-related activities and seminars for adults older than 50 years of age. Special services and discounts for members include a parking decal and reserved parking for Baptist Medical Towers' patient parking lot and a bimonthly newsletter. Monthly educational seminars are offered at Baptist Hospital as well as at five other Baptist Health Care facilities. To join GoldenCare, call 850.469.2356 for an application or go to eBaptistHealthCare.org/GoldenCare.

PATIENT PORTAL—FOLLOW MY HEALTH

You can manage your health information using the Baptist Health Care Patient Portal. A Follow My Health account will give you online access to check your personal records, view test results and request prescription refills. Follow My Health also lets you send and receive secure online messages to your physician's office. You will receive an email from us following your stay that will allow you to create your account. For support and information, call 1.888.670.9775 or email support@followmyhealth.com.



STAFF WHO CARED FOR ME DURING MY STAY

Physician _____ Specialty _____

Physician _____ Specialty _____

Physician _____ Specialty _____

Nurse _____ Specialty _____

Nurse _____ Specialty _____

Nurse _____ Specialty _____



Want to Say Thank You to Your Nurse? Share Your Story!

The DAISY (Diseases Attacking the Immune SYstem) Award is an international recognition program that honors and celebrates the skillful, compassionate care nurses provide every day. The DAISY Foundation was established by the family of J. Patrick Barnes after he died from complications of the auto-immune disease ITP in 1999. During his hospitalization, they deeply appreciated the care and compassion shown to Patrick and his entire family. When he died, they felt compelled to say “thank you” to nurses in a very public way. Please say thank you by sharing your story of how a nurse made a difference you will never forget!

I would like to thank my nurse (name): _____ from the _____ Unit.

Please describe a specific situation or story that demonstrates how this nurse made a meaningful difference in your care.

More space on back to continue your story

Thank you for taking the time to nominate an extraordinary nurse for this award! We’d love to include you in the celebration if your nurse is selected for a DAISY Award. Please tell us a little about yourself.

Your Name _____ Date of nomination: _____

Phone _____ Email _____

I am (please check one):

- Patient
 Visitor
 RN
 MD
 Staff
 Volunteer



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Please submit your nomination form to:
 DAISY Award Facilitator
 Baptist Hospital, Ground Floor Administration
 Email: DAISYAward@bhcpns.org

