



# MEDICATION SAFETY

# Your Safety is Our Priority

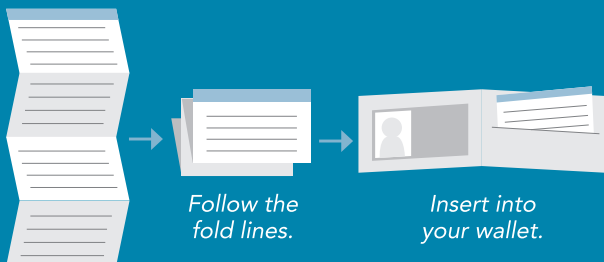
Our process has been established to help ensure your safety and provide you with the best medical care possible. Being involved in your care is very important in helping us provide a safe environment for you.

Those who participate with their healthcare team tend to have better outcomes and more positive hospital stays.

**We encourage you to become a partner in your care by working closely with the doctors, nurses and other members of our staff.**

## How to Use the Medication Tracker

A medication tracker has been provided so that you have easy access to your records at all times. Tear off the right side panel and inscribe your current medications. When done, follow the fold lines as indicated and keep in your wallet.



# About Medication Safety

**It is very important that you understand your medication plan. Lack of understanding about medications is a common reason why patients have visits to the emergency room and get readmitted to the hospital within days of discharge.**

**Remember: medications are chemicals.**

No matter what type of medication you are taking or how minor you think the medication may be, it is still a chemical. It can be dangerous, even deadly, if not taken properly.



**Here are some important instructions for you and your family to know following departure:**

- A complete list of medications that you take is very important to the doctors and nurses.
  - Keep a list of your medications with you at all times, including any medications that the doctor prescribed, medications you bought over-the-counter, and any herbal remedies or vitamins.
- Patient identification is the key to ensuring the right patient gets the right medication.
  - Your identity **MUST** be verified before you take every medicine.

- You should be told what medicines you are being given.
  - Ask which medicines you are being given before you take them.
- It is important that you are monitored closely after you receive the first dose of new medicine.
  - It is important to let your doctor or nurse know how the medicine makes you feel just in case you are having a side effect that needs to be addressed.
- Your doctors and nurses need to be aware of any allergies that you may have.
- It is important that you understand how to take your medicines before you leave the hospital.
  - Repeat medication instructions back to the nurse to show that you understand the medicine plan you are going home on.



### **A few more tips to help ensure your safety include:**

- Know as much about your medical condition as possible.
- Write down your questions.
- If the doctor or nurse appears to be too busy to answer questions, ask them to set up a time when you can discuss.

## After You Go Home

- Keep your doctor and pharmacy contact information with you at all times.
- Keep a list of the medicines you take regularly with you at all times. Be sure to note:
  - Medicine name
  - Intended purpose (blood sugar, blood pressure, etc.)
  - Amount taken
  - How often and at what times of the day
- Use the same pharmacy as much as possible.
- Be cautious when taking a new medicine for the first time.
- Check the name of the medicine on the bottle before you take it.
- Read the label of your medications and take them as prescribed.
- If you miss a dose, **do not** double the dose.
- Keep your medicines in their original containers.
- Store your medicines according to the label instructions.
- Dispose of expired medicines.
- Keep **all** medicines out of the reach of children.



# MEDICATION TRACKER

Please carry this in your wallet at all times.  
Include all prescription and non-prescriptions,  
vaccinations, herbals, vitamins, supplements,  
creams, eye drops, and inhalers updated  
in pencil.

PATIENT NAME: \_\_\_\_\_

## VACCINATIONS

Fold Here

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## MEDICATION

Fold Here

Drug: \_\_\_\_\_  
Strength: \_\_\_\_\_  
Start Date: \_\_\_\_\_  
Directions: \_\_\_\_\_  
\_\_\_\_\_  
Prescriber: \_\_\_\_\_

## MEDICATION

Fold Here

Drug: \_\_\_\_\_  
Strength: \_\_\_\_\_  
Start Date: \_\_\_\_\_  
Directions: \_\_\_\_\_  
\_\_\_\_\_  
Prescriber: \_\_\_\_\_

## MEDICATION

Drug: \_\_\_\_\_

Strength: \_\_\_\_\_

Start Date: \_\_\_\_\_

Directions: \_\_\_\_\_

\_\_\_\_\_

Prescriber: \_\_\_\_\_

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## MEDICATION

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Strength: \_\_\_\_\_

Start Date: \_\_\_\_\_

Directions: \_\_\_\_\_

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Strength: \_\_\_\_\_

Start Date: \_\_\_\_\_

Directions: \_\_\_\_\_

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Prescriber: \_\_\_\_\_



LOUISIANA HOSPITAL ASSOCIATION

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