

SURVIVING A TRIP TO THE ER

By Wendy Johnstone, MA, Gerontology



I recently received a late-night phone call from a friend whose mother was in the hospital after a fall. Needless to say, there was panic and uncertainty in her voice.

I started asking some questions around the severity of her mom's fall, if she was being admitted to the hospital, and the physician's diagnosis and possible treatment. I was met on the other end with complete silence followed by, "The last five hours were a blur, and I feel like I don't know anything more than when we first arrived at the ER!"

Most emergency room (ER) staff likely see this same situation over and over again.

In Canada, just fewer than half of all seniors 65 and older make a trip to their local hospital emergency. The risk of hospitalization increases with age, especially for those individuals older than 85. Viruses and infections, a fall, a stroke, a heart attack, and sudden onset confusion are the most common reasons for a trip to the ER.

Since we can't bubble-wrap ourselves or the people we are caring for, the best we can do is keep critical information on hand in the event of a medical emergency. Being prepared by keeping this information handy can lead to a better emergency hospital stay.

Here's a **list of what you need**:

- CareCard and other health insurance numbers, birth date, address, and telephone numbers
- List of medications (prescription and non-prescription) and allergies (both to food and medications). One of the easiest ways keep this current is to get a printout each time you visit your pharmacist
- Medical history including surgeries, and recent hospitalizations also helps to speed up the diagnosis and processes. Otherwise, the hospital personnel start from scratch
- Contact information for physician
- Any type of health care directive

Of course, with any medical information, it's best when current. Updating medical information is unlikely to be at the top of your to-do list; consider putting it in your calendar or Smartphone in three- to six-month intervals. Kinda like cleaning the fishbowl! Which reminds me...

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BUILDING AN “IN AN EMERGENCY” FILE

Follow the steps below to create a file of information that travels to the ER – whether by ambulance or by someone else.

Step 1: Make two copies of the following worksheets

- Emergency Contact – p. 3
- Medical History p. 5
- Current list of medication p. 6

Step 2: Make two copies of the following documents

- Representation Agreement or where to find it
- Advance Care Director or where to find it
- DNR – Do not Resuscitate

Step 3: Place a copy of each of the documents listed above inside two plastic file folder holders. You should have six documents in each one.

Step 4: Place the “In An Emergency” file in two different locations. For example, place it on the back of a bedroom door and on the fridge.

Voila! Fini!

Other Tips

- It's always handy for other family or neighbors to have a copy, too.
- If there are two of you in the household, I usually recommend that each individual has their own emergency contact form and separate care planning workbook.
- If you are caring for but not living with the care recipient, make sure you have a copy of “In An Emergency” file in your home and/or vehicle.

EMERGENCY CONTACT SHEET

Name _____

Address _____

Telephone _____

Date of Birth _____ Male Female

FIRST CONTACT

Name of Primary Caregiver _____

Address _____

Telephone _____ Mobile _____

Email _____

- Relationship Child
 Other family, specify
 Friend, specify
 Other, specify

OTHER EMERGENCY CONTACTS

Name _____ Telephone _____

Address _____

Email _____ Has a spare key? Yes No

- Relationship Child
 Other family, specify
 Friend, specify
 Other, specify

OTHER KEY INFORMATION

Physician Name _____ Phone _____

Blood Type _____

Name of Pharmacy _____ Phone _____

Pharmacist _____

Extended Health Insurance (Name of company and policy number) _____

Name of Health Care Representative _____

Phone _____

On file _____ (where it is kept)

Name of Power of Attorney _____

Phone _____

On file _____ (where it is kept)

Is there a Representation Agreement in place? Yes No

On file _____ (where it is kept)

Is there a Do Not Resuscitate (DNR) in place? Yes No

On file _____ (where it is kept)

MEDICAL INFORMATION

CURRENT MEDICAL CONDITIONS

If Diagnosed

Date of Onset _____ Treating Physician _____

Treatment Plan/Medications _____

Date of Onset _____ Treating Physician _____

Treatment Plan/Medications _____

Date of Onset _____ Treating Physician _____

Treatment Plan/Medications _____

Date of Onset _____ Treating Physician _____

Treatment Plan/Medications _____

Date of Onset _____ Treating Physician _____

Treatment Plan/Medications _____

CURRENT MEDICATIONS

List all prescription and non-prescription medications. You can also cut out the top part of your blister pack and affix to this page.

Date last updated _____

NAME	DOSE/FREQUENCY	TIME OF DAY	DATE PRESCRIBED

ALLERGIES

Allergies & Sensitivities	Treatment