



Pulse Center for Patient Safety Education & Advocacy

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www.PulseCenterforPatientSafety.org



Michael (Mikey)

Sharing Information
Education
Support

No Advice
No Referrals
Empathy

A Growing Community





FAMILY CENTERED PATIENT ADVOCACY TRAINING





- Homeless Mothers
- Lupus
- Transgender
- Hispanic / Non-English
- Quadriplegic
- HIV/AIDS
- Autism
- Alzheimer's / Dementia



Learning From Specific Groups Leads:

Better
Communication

Better sharing
information

Better ways to
prepare as a
patient or
support person

Think ***STARS***

for better communication with your clinician

Specifics - Specific location of pain and what you were doing before it started.

Treatment - Are you taking medication, are you on new medication, do you know the names and doses of your medication? Are you treating the pain with heat or cold?

Associated Symptoms - Dizziness, racing heart, bleeding, nausea or vomiting?

Relieve or provoke the symptoms - What makes it feel better, or worse?

Severity - On a scale of 1-10, 10 being the worst, how are you affected?



www.pulsecenterforpatientsafety.org



MY PERSONAL MEDICAL DIARY

Print and make copies.
Use as many
as needed
www.pulsecenterforpatientsafety.org

NAME _____ DATE OF BIRTH ____/____/____
 I HAVE ___ DO NOT HAVE ___ A HEALTHCARE PROXY (NAME) _____ # _____
 I HAVE ___ DO NOT HAVE ___ AN ADVOCATE / CAREGIVER / PATIENT ASSISTANT _____
 Contact # _____ (THIS FORM SHOULD NOT REPLACE AN OFFICIAL HEALTHCARE PROXY FORM)

EMERGENCY CONTACT NAME: _____ PHONE #: _____
 RELATIONSHIP: _____ SAME AS HC PROXY ___ ADVOCATE ___ NEITHER ___
 I HAVE THE FOLLOWING ALLERGIES: _____
 MY PRIMARY INSURANCE COMPANY: _____ NO. _____
 PHONE: _____ ADDRESS: _____
 MY SECONDARY INSURANCE COMPANY: _____ NO: _____
 PHONE: _____ ADDRESS: _____

I USE THE FOLLOWING HEALTHCARE PROVIDERS

NAME _____ PHONE _____ SPECIALTY _____ ADDRESS _____ Date Started _____	NAME _____ PHONE _____ SPECIALTY _____ ADDRESS _____ Date Started _____	NAME _____ PHONE _____ SPECIALTY _____ ADDRESS _____ Date Started _____
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I TAKE THE FOLLOWING MEDICATIONS

MEDICATION NAME	DOSAGE & FREQUENCY	DATE STARTED	DATE STOPPED	PRESCRIBED BY	SPECIAL INSTRUCTIONS	REASON FOR TAKING

Keep an
Accurate List
of
Medications

Take CHARGE™

5 Steps to Safer Health Care



1. Understand
& Complete
Your Advance
Directives



2. Keep a
Record of Your
Medical History
& Current
Medications



3. Prepare for
Doctor Visits /
Make A List of
Questions



4. Prevent
Infections / Ask
Caregivers to
Wash Their
Hands



5. Use an
Advocate / Be
an Advocate for
Others

TakeCHARGE of your health

The TakeCharge Campaign is dedicated to empowering people to TakeCharge of their health care decisions with informed decision-making and effective advocacy.



1

Understand & Complete Your Advance Directives

"Advance directives" is a general name for several types of documents you can sign to help ensure that your wishes about medical treatment are known and respected if you are unable to communicate for yourself. Designate someone who can speak on your behalf at times when you can't.



2

Keep a Record of Your Medical History & Current Medications

Keep a detailed record of your medical history and all past and current medications, vitamins and herbs. Bring this information with you to every medical appointment. Tell them about any drug allergies you have.



3

Prepare for Doctor Visits / Make A List of Questions

Make your doctor visit count. Prepare a list of questions and symptoms before you visit your doctor or go for a procedure or to the hospital. A doctor won't be able to answer your questions if you don't ask.



4

Prevent Infections / Ask Caregivers to Wash Their Hands

1 in 25 people who are hospitalized will get an infection. Help stop the spread of infections. Ask caregivers to wash their hands before touching you. If you see a healthcare provider reaching for you without having washed, ask them to do so. Gentle, but assertive reminders can be lifesaving.



5

Use an Advocate / Be an Advocate for Others

Everyone getting medical treatment should have someone to support them, to help raise questions, take notes, enhance communication with medical staff and make sure they are receiving patient-centered care. This person is called a "patient advocate". Choose an advocate and be an advocate for someone.

Learn more at www.TakeCHARGE.care

TakeCHARGE is a program of Pulse Center for Patient Safety Education & Advocacy / Pulse of NY





“What do you want to do?”







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