

Your Hospital Survival Guide

8 things to do during your stay

Hospital staff members aren't out to hurt you, but mistakes do happen, especially when things are busy or chaotic. So be polite-but alert. These steps can help improve hospital-patient safety.

1 Monitor your meds. The average hospital patient gets 10 different drugs, some of which might look similar or have names that sound alike, prescribed by various specialists with cryptic handwriting who don't always communicate with each other. Busy staffers may mistake micrograms (mcg) for milligrams (mg) or one patient for another. The Institute of Medicine estimates that, on average, there's at least one medication error for every admitted patient. So before taking any drug, ask what it is, why it's necessary, and what the dose is. You, or your helper, should also note any side effects.

2 Guard against infection. Infections most often come from dirty instruments or hands during surgery, from improperly sterilized or handled catheters or needles, or from the contaminated hands of doctors or other health-care workers. The emergence of antibiotic-resistant bacteria has further increased the risk of such infections. Take these steps to prevent infections:

- Insist on clean hands. Anyone who touches you, including your visitors, should first wash his or her hands with soap and water, or use an alcohol-based hand sanitizer. Don't hesitate to say: "I'm sorry, but I didn't see you wash your hands. Would you mind doing it again?"
- Ask every day if catheters, ventilators, or other tubes can be removed. The risk of infection from a urinary catheter, for example, increases significantly if it's left in place for more than two or three days.
- Ask if an antibiotic is necessary in the hour before surgery. A single dose can be appropriate for certain operations, but research suggests that the drug or its timing is wrong in up to half of cases.

- Ask if shaving your surgical site is necessary. Nicks can provide an opening for bacteria.
- Question the need for heartburn drugs. Hospital patients are often prescribed a proton pump inhibitor, such as lansoprazole (Prevacid and generic) or omeprazole (Prilosec and generic). But since those drugs can increase the chance of intestinal infections and pneumonia, make sure you really need one.



3 Watch for unnecessary tests. They're not only a waste of time and money, but can also expose you to radiation or other side effects. Moreover, they can produce false positive results that lead to unnecessary follow-up tests and treatment. So make sure you understand the purpose of each test, and that you're not getting a test meant for someone else.

4 Get "just enough" pain relief. Many hospital patients report that their pain was not adequately managed. And uncontrolled pain increases the risk of long hospital stays and complications. But too much of a pain reliever can slow recovery and increase the risk of falls. To get the right amount:

- Ask your admitting doctor to leave standing orders for pain medication (as well as for constipation and sleep), so if the need arises, you won't face a long wait while the nurse calls your doctor.
- Discuss anesthesia with the surgeon or anesthesiologist well before the procedure. Too much increases the risk of complications during surgery. But up to 40,000 surgical patients a year actually wake up in the middle of their operation because of insufficient anesthesia. Also mention your pain tolerance. Saying you have a low tolerance makes it more likely that you'll get pain meds on time and in adequate doses. Saying you have a high tolerance might mean starting on lower doses, which could reduce the risk of grogginess and other side effects.
- Ask if an antibiotic is necessary in the hour before surgery. A single dose can be appropriate for certain operations, but research suggests that the drug or its timing is wrong in up to half of cases.
- Speak up if pain is bothering you. And don't be afraid of the strongest painkillers after surgery. Short-term use poses little if any risk of addiction.
- Nerve blockade (pain drugs directly injected into your spine) might be preferable to narcotics for certain operations, such as joint replacement. They control pain equally well but won't make you groggy.
- Most hospitals now offer patient-controlled intravenous analgesia (PCA). This lets you administer your own medication (while also preventing overdoses) by pushing a button on a computerized pump.

• Some self-help steps might provide further pain control, research suggests. They include listening to soothing music, guided imagery, deep breathing, muscle relaxation, or self-hypnosis through headphones.

5 Get moving. That can help prevent bedsores and blood clots that can form in leg veins. So when you're up to it, ask your nurse—or a friend or relative—to help you out of bed and, if possible, take a stroll. If you have to spend a lot of time in bed, ask for special pads that help prevent bedsores, and "pneumatic" stockings that can help prevent blood clots.

6 Stay warm. Body temperature drops by several degrees during surgery, which can impair immune function and blood flow, and make infections more likely. So ask your doctor if it makes sense in your case to use a special surgical blanket or other technique to keep you warm.

7 Get autographed. While operations on the wrong patient or the wrong part of the body are becoming increasingly rare, they do happen. So make sure the surgeon knows who you are, and, if applicable, initials the surgery site.

8 Stay alert. If you sense that something isn't right, trust your instincts and speak up. Experts say that patients are often afraid to raise concerns, though their perceptions are often accurate.

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