



Families for Patient Safety
CampaignZERO.org

Use These Simple Checklists for Your Loved One's Safe Care

Nurses are truly great champions for quality care — but they are in charge of several patients at once and often **pulled in different directions**. That's why **you are important** to your loved one's care team.

As your loved one's Care Partner, you can be the extra pair of eyes, ears and hands to help prevent the most common potential problems nurses watch for.

The simple checklists on the following pages will help you learn about complications patients can face during *any* hospital stay — and **what you can do to help nurses safeguard** your loved one's care to avoid them. **These checklists are very important**. Please read them over a few times.

Feel free to ask your loved one's nurses any questions you have. They may have suggestions for other things you can do — or watch for — to help care for your loved one.

Please make the extra effort to follow the checklists to prevent infection — a top priority for everyone!



Remember,
**It's OK to
Speak Up**

Remember to



Wash Hands!

About “Superbug” Infections:

Dangerous and difficult-to-fight infections such as MRSA (mersa), VRE, and CRKP are called “Superbugs.” The germs are invisible and they’re everywhere in every hospital — even on clothing.

Who’s At Risk:

All patients are at risk for Superbug infections.



Use this Checklist to

Help Prevent “Superbug” Infections

- ✓ **Always wash your hands with soap and warm water, or alcohol gel or foam:**
 - Before you touch your loved one
 - Whenever you enter and leave your loved one’s room
- ✓ As needed, kindly **remind visitors and others to wash their hands before touching your loved one.** It’s OK to speak up — in a rush, even nurses and doctors may forget this step, but it could be a life-saver!*
- ✓ Help make sure your loved one washes hands and uses a soft-bristled brush to gently clean under nails, especially after using the bathroom and before eating.
- ✓ Use alcohol wipes to clean away germs from any surfaces your loved one and others may touch, such as...

Cell phone

Telephone

Inhalers

TV remote

Doorknobs

Faucets

Grab rails

Toilet handle

Call buttons

Bed rails

IV pole

Spirometer

Bedside tables and chairs

Wheelchair arms and backs

- ✓ **Be sure to clean again after every touch/contact by anyone.**
- ✓ Ask for bottles of alcohol-based gel to put in easy reach for your loved one.
Note: *It’s OK to ask for alcohol wipes and gel, and a nail brush. If you buy them yourself, choose well-known brands.*
- ✓ Make sure nurses and doctors use clean stethoscopes and thermometers.



Get a Nurse if:

You see any changes in the skin (or your loved one tells you about):

- **Oozing, pus, increasing redness, tenderness around surgery stitches**
- **Bumps or spots that look like boils, pimples or bug bites**
- **Breaks in the skin or a skin rash**

Your loved one shows signs of (or tells you about):

Chills , shivering

Headache

Body aches

Confusion

Diarrhea

Cramps

Extreme pain

Nausea

No appetite

Fast heartbeat

Fast breathing

**It's OK to
Speak Up**

Remember to



Wash Hands!

About C. diff:

C. diff is another type of infection from germs in hospitals. It causes diarrhea and dehydration that can lead to heart failure.

Who's At Risk:

All patients are at risk of D diff. Risk factors include aged 65+, recent use of antibiotic medicines, prior history of C. diff, long bouts of diarrhea, weak immune system, live in a nursing home or other long-term care facility.



Use this Checklist to

Help Prevent C. diff Infection

- ✓ **If your loved one has been on antibiotics in the past year, lives in a nursing home or long-term care facility, or has ever had C. diff, make sure these facts are part of the medical record.** To be on the safe side, tell your loved one's nurses yourself.
- ✓ Follow the checklist for preventing Superbug infections.
- ✓ **Alcohol wipes won't kill C diff germs.** So use bleach wipes to help **keep your loved one's surroundings extremely clean.** Wipe down these surfaces when your loved one first arrives and after every touch/contact by anyone: *(Pay special attention to the toilet levers, faucets and grab bars in the bathrooms.)*

TV remote

Telephone

Call buttons

Door knobs

Bedside tables

Bedside chair

Bed rails

Faucets

Toilet handle

IV pole

Wheelchairs *(backs and arms)*

Cell phone, iPod, Laptop, Pens, Eyeglasses and Case

Note: *It's OK to ask for bleach wipes. If you buy them yourself, choose a trusted brand from a well-known store.*

- ✓ **Make sure you and your loved one wash hands with warm soap and water before eating and after using the bathroom.** A soft, soapy nail brush helps clean under nails where C. diff spores can hide.
- ✓ Bring clean clothes to the hospital for your loved one to wear home. Store until needed in a suitcase or plastic bag to keep germ-free.
 - As soon as you get home, wash all clothing you and your loved one wore in the hospital in warm, soapy water with bleach. Use a clothes dryer to help kill germs. *(Share this tip with visitors too!)*



Families for Patient Safety
CampaignZERO.org



Get a Nurse if:

Your loved one shows signs of (or tells you about):

- **Diarrhea** (*may be bloody*)
- **Stomach pains, cramps**
- **Loss of appetite**
- **Nausea**
- **Chills**
- **Fast/racing heartbeat**

Notes:

Remember,
**It's OK to
Speak Up**

Remember to



Wash Hands!

About Bloodstream Infections:

Germs can invade the body through cuts or breaks in the skin, resulting in serious infection that's carried through the body in the bloodstream.

Risk Factors:

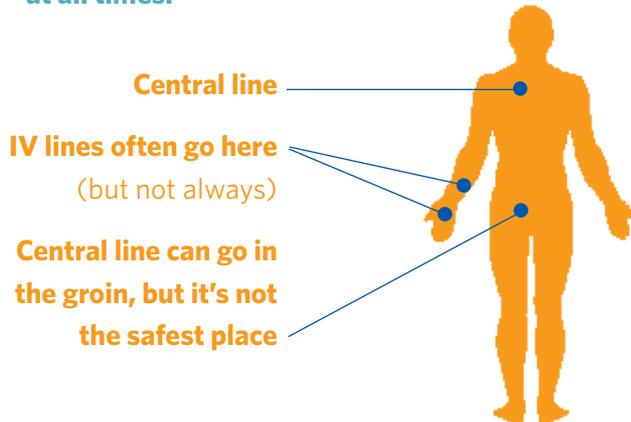
Use of a tube and bag system called an "IV" or a "central line" to deliver fluids.



Use this Checklist to

Help Prevent Bloodstream Infection

- ✓ When a central line is inserted, ask: "Are you using a central line bundle and checklist?"
- ✓ Watch to make sure that nurses and doctors **always:**
 - **Wash their hands thoroughly before touching your loved one**
 - **Use sterile instruments and supplies**
 - **Clean the skin with an alcohol wipe**
 - **Choose the safest spot**
Ask, "Why?" if groin is chosen
 - **Use a clean sheet to drape your loved one's body**
 - **Wear a mask**
 - **Cover the area with a sterile pad**
- ✓ **Make sure any openings in the skin are kept covered at all times.**



Get a Nurse if:

Your loved one shows signs of (or tells you about):

Chills , shivering

Headache

Confusion

Diarrhea

Extreme pain

Nausea

Fast heartbeat

Fast breathing

Check out **PartneringToHeal** — a great video for Care Partners. In just a few minutes, it shows how you can help prevent infection — and why your help is so important!

Notes:



Remember,
**It's OK to
Speak Up**

Remember to



Wash Hands!

About Blood Clots:

Blood clots can form in the deep veins of legs and arms.

Sometimes, a piece of the clot breaks off and travels to the lungs, which is called an embolism, pulmonary embolism, or PE for short. Blood clots and embolisms are serious.

Risk Factors:

Surgery (stomach, hip, and knee, especially), family history of clotting, diabetes, smoking, birth control and other hormone pills, obesity, spinal cord injury, multiple injuries, lack of exercise



Use this Checklist to

Help Prevent a Blood Clot (PE)

- ✓ **Tell doctors and nurses you're concerned about blood clots.**
- ✓ Make sure your loved one has:
 - Special stockings, boots or arm bands that pulse
 - Regular and frequent walks — if allowed by your loved one's doctor
 - A prescription for a blood thinner*
- ✓ **Watch for signs of blood clots for at least one month after your loved one leaves the hospital.** (See list under "Get a Nurse if".)
- Remember that blood clots can form even if your loved one feels 100% "back-to-normal" in other ways.
- ✓ **Encourage walks and exercise after your loved one leaves the hospital** (if OK'd by doctor).

* *To be on the safe side, be sure the doctor is aware of other medications, vitamins and herbs your loved one is taking— plus any prior bad reactions to medications.*

If you are not sure, it's OK to ask "Before you give the blood thinner, can we make sure nothing else will interfere with it?"

A review of your loved one's diet is a good idea, too.

Get a Nurse if:

Your loved one shows signs of (or tells you about):

- **Swelling in a leg or arm**
- **Pain or a burning feeling in a leg or arm**
- **Shortness of breath, difficulty breathing**

Special Note: *If your loved one is on pain medication or on a breathing machine, you need to be especially watchful because the senses are dulled.*

Notes:

Remember,
**It's OK to
Speak Up**

About Medication Mix-Ups:

Safety steps are followed each time a patient gets a medicine in the hospital. Still, it's important for you to help, too — there is no such thing as “too safe” for your loved one!

Risk Factors:

Patients tend to get several medications in the hospital. Many look alike and their names sound alike. Nurses can be distracted, especially when others talk or interrupt them while giving a medication.



Use this Checklist to

Help Prevent Medication Mix-Ups

- ✓ **Make sure your loved one's allergies and any bad experiences with medicines in the past are included on the medical record — and highlighted in a bold way.**
- ✓ **Before a nurse ever gives a medicine, ask:**
 - What is the medicine you're planning to give? (If an IV bag is used, read the label to double check it's the right medicine.)
 - What is it for?
 - What is the dose?
 - Who prescribed it?
 - Say: “Let’s confirm that it's for (your loved one's name).”
 - For medicines in an IV bag, ask: “What time do you think this bag will run out?” *If the bag empties completely, get a nurse, especially if you see blood creeping up the IV tube.*
- ✓ **Don't talk to nurses when they give medicines — or distract them.**
 - However, speak up immediately if you sense a mistake is being made. (For example, wrong patient, wrong medicine, wrong time, wrong dose, wrong way.)
- ✓ **Research the pros and cons of every drug prescribed** for your loved one. Make notes about the potential side effects and interactions. Buy a drug guide or look on the Internet. If you have any concerns, bring them up immediately with the attending doctor.
- ✓ **Record every time your loved one gets a medicine.**
 - If your loved one is 65 or older, check the Beers List, too. (It has info about medications considered unsafe or “iffy” for seniors.)



Families for Patient Safety
CampaignZERO.org

Get a Nurse if:

You see — or your loved one tells you about — signs of bad reactions to medications:

Diarrhea

Stomach cramps

Coughing

Wheezing

Difficulty breathing

Difficulty swallowing

Swelling face

Swelling/itchy eyes

Rash or hives

Confusion, anxiety, restlessness

Light-headedness, dizziness

Fainting

Swelling in neck

Bluish lips

Cool, clammy skin

Chest pain

Unusual sweating

Note: *It's OK to simply trust your gut.* You know your loved one best. Every medication — or combination — could affect your loved one in a way that's not expected.

Always get a nurse if you have any worries about anything that "just doesn't seem right."

Notes:

Remember,
**It's OK to
Speak Up**

Remember to



Wash Hands!

About Falling:

Falls can happen to anyone in an unfamiliar place.

Most patients are tired, weak or sleepy from medications, or suffering from conditions affecting balance.

Who's At Risk:

All patients are at risk for falling.



Use this Checklist to

Help Prevent Your Loved One from Falling

- ✓ **Tell nurses you are concerned about your loved one taking a fall, or falling out of bed.**
 - Ask about getting a cane or walker, and using bed rails.
 - Ask about the hospital's fall protection equipment such as low beds and floor padding.
- ✓ **Look for things in your loved one's room that might cause a trip and fall.**
 - Point out all furniture and equipment on wheels.
 - Discuss ways to move around the room without leaning on wheeled items for support.
- ✓ **Ask for a bed alarm and a room close to the nurses' station.**
- ✓ Make sure someone helps your loved one go back and forth to the bathroom or commode, and that someone is **on standby in your loved one's room for every trip.**
- ✓ **Hang our "CAUTION!" signs** in can't-miss spots in your loved one's room, such as on doors or over the head of the bed.
- ✓ **Ask the nurses for non-skid socks, or bring slippers, for your loved one to wear when out of bed.**
- ✓ **If you are able, lend your arm for support when your loved one walks.**
 - Please don't take a risk you might injure yourself — it's OK to ask for help.
- ✓ **Watch to make sure the hospital gown and any IV tubes won't trip your loved one.**



Get a Nurse if Your Loved One Falls

- **Hit a call button immediately.**
- **Put a blanket over her/him.**
- **Go in the hall and call for help.**
- **Make sure someone hears you and comes right away.**
- **Do not move your loved one.**

Note: If your loved one falls, or falls out of bed, **ask to be part of the hospital's post-fall huddle to find out:**

- **How the fall happened**
- **What will be done to help make sure your loved one doesn't fall again.**

Notes:



Remember,
**It's OK to
Speak Up**

Remember to



Wash Hands!

About Bed Sores:

Bed sores are pits or breaks in the skin in areas that don't get much blood flow (bony areas) or where sweat collects (folds of skin). They can be a dangerous tunnel for infection. Bed sores are much easier to prevent than to heal.

Risk Factors:

Thin skin, stroke, lung conditions, cancer treatment, diabetes, spinal cord injury, bed/chair-bound, poor circulation, very thin/overweight, age 65 and older



Use this Checklist to

Help Prevent Painful Bed Sores

- ✓ **Help make sure your loved one changes positions every two hours — even more often if your loved one can manage it.** (It helps to set a timer.)
- ✓ **Ask for an alternating air pressure mattress** and some type of pad to absorb moisture.
- ✓ **Make sure your loved one has foam cushions between ankles and knees, for elbows, and back of head.**
- ✓ **If the hospital gown or sheets become wet, get help to change them as soon as possible.** If you are able-bodied, help change the sheets.
- ✓ **Help make sure that nothing rubs or scratches your loved one's skin —** ask nurses about barrier cream for fragile skin areas.
- ✓ **When your loved one gets out of bed, either alone or with help, make sure it's done very gently to avoid scraping any skin.**
- ✓ **Ask the attending doctor about "upping" the protein in your loved one's diet.** Ask if it's OK for you to bring high-protein snacks, drinks or food.
- ✓ **It's OK to ask for the hospital wound care specialist if you have any concerns.** *Remember, bed sores are much easier to prevent than to heal!*

Help Make Sure

Nurses Check Your Loved One's Skin Every Day

If OK with your loved one, check his or her skin daily — or even more often.

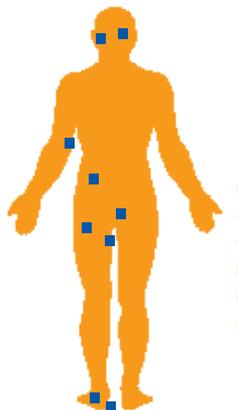
This is Where Nurses Look:

- The bony areas (see blue dots):

Back of head	Behind ears
Elbows	Hipbones
"Sit" bones	Tailbone
Knees	Heels

- Areas where sweat collects:

Between buttocks
Between folds of fat
Under breasts



This is What Nurses Look For:

- **Any breaks or scrapes in the skin**
- **Abnormally white patches of skin** (especially on bony areas)
- **Pinkness, redness or swelling in the skin that doesn't go away in minutes**
- **Areas of skin that are extra-warm**

If Skin Problems Appear:

Make sure no pressure is put on the abnormal areas of skin for the next 24-48 hours, or until the skin is back to normal. Ask nurses for their attention and help.

Remember,
**It's OK to
Speak Up**

Remember to



Wash Hands!

About Pneumonia from a Ventilator:

Patients who need a machine to help them breathe can get a lung infection (pneumonia) if germs get into the breathing tube. This infection is also called VAP, for Ventilator Associated Pneumonia.

Risk Factors:

Use of ventilator for breathing, lung disease, age 65 and older



Use this Checklist to

Help Prevent Pneumonia from a Ventilator (VAP)

- ✓ **Ask about the sterile steps used to put the breathing tube into your loved one.**
- ✓ **Ask for a daily check of your loved one's ability to breathe without machine help.**
- ✓ **Use our angle guide to help make sure your loved one's back and head are always at least at a 30-degree angle by raising the mattress.**
 - If your loved one slumps, tell a nurse right away.
 - If you are able-bodied, ask if you can help position your loved one to sit up straighter.
 - Be on the lookout for bed sores on your loved one's tailbone and "sit bones." Follow the checklist to prevent bed sores.
- ✓ **Ask about medicines to help prevent your loved one from getting stomach ulcers** (sometimes caused from the breathing tube).
- ✓ **Ask about care for your loved one's teeth, gums and tongue every four hours** to kill germs that could go from mouth to lungs. Make sure these are used every time:
 - A toothbrush with soft bristles and 1.5% peroxide toothpaste
 - A vacuum tool to pull germs and waste from the mouth
 - A chlorhexidine rinse (*It tastes bad — but it works!*)

Note: *Sometimes patients on ventilators have their hands bound to keep them from pulling out the tubes by accident. This may be scary for your loved one, and may even cause a panic attack. Get a nurse to help ease your loved one's fears.*

Get a Nurse if:

You see signs of (or your loved one tells you about):

- **Fever, chills, shivering, body aches, headaches, confusion**
- **White patches or sores in your loved one's mouth or on the lips**
- **Cough with phlegm (can be yellow or green)**
- **Increasing need for suctioning**
- **Need for higher settings on the breathing machine**

You see:

- **The tube come loose**
- **A pool of water inside the tube (If in doubt, call a nurse.)**

Notes:



Remember,
**It's OK to
Speak Up**

Remember to



Wash Hands!

About Urinary Tract Infections:

A urinary tract infection (UTI) can develop when germs enter the body through a plastic tube used to drain urine. The bladder, kidneys and urethra can all be infected. (This infection is also called a “CAUTI” for Catheter Associated Urinary Tract Infection.)

Risk Factors:

Use of plastic tube and bag system for urine collection (called a “Foley” catheter)



Use this Checklist to

Help Prevent a Urinary Tract Infection (CAUTI/UTI)

- ✓ **Every day, ask if the Foley catheter can be removed.**
- ✓ **When no longer needed, ask the doctor for a written order to take it out.**
 - If not taken out as ordered, politely remind at every shift change until the tube and bag are removed from your loved one’s body.
- ✓ **Ask about the cleaning plan** *(daily is ideal).*
- ✓ **To prevent urine from going back into your loved one’s body, keep an eye on the tube for kinks and tangles, and straighten them.**
 - Make sure the bag hangs below your loved one’s stomach area so urine can’t back up the tube.
- ✓ **Make sure the bag is replaced when full.**

Get a Nurse if:

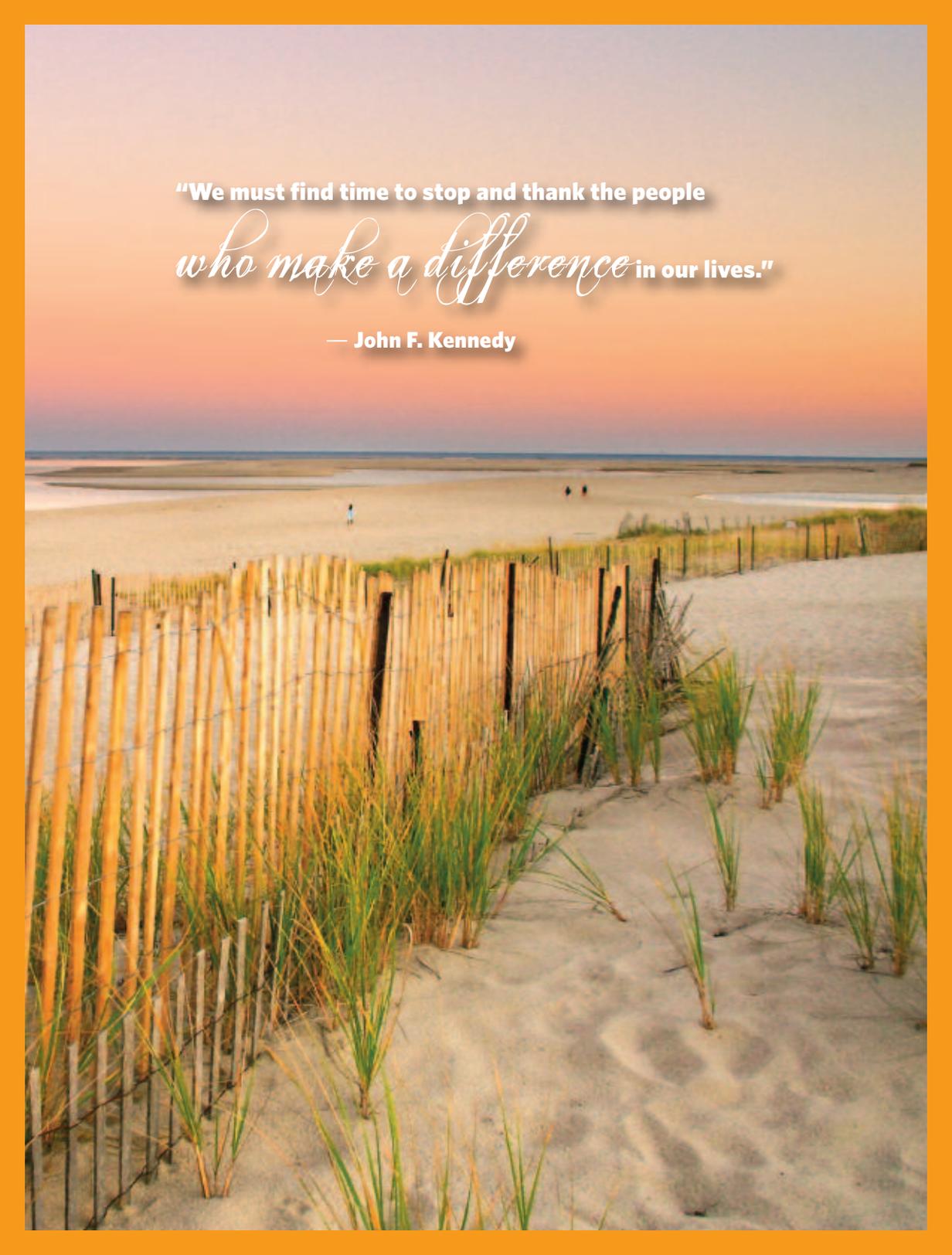
You see signs of (or your loved one tells you about):

- **Chills, shivering, body aches, headaches, confusion**
- **Pain or a burning feeling in the lower stomach area**
- **Lower back pain**
- **Blood in urine bag** (You may see a slightly pink color.)

Notes:



Remember,
**It's OK to
Speak Up**

A photograph of a beach at sunset. In the foreground, there is a fence made of vertical bamboo poles and wire mesh, with several clumps of green beach grass growing through it. The sand is light-colored and shows some tracks. In the middle ground, a wide expanse of beach leads to the ocean. A few small figures of people can be seen in the distance. The sky is a mix of soft orange, pink, and light blue, indicating the time is either dawn or dusk.

"We must find time to stop and thank the people

who make a difference **in our lives."**

— John F. Kennedy