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When calling from a hospital phone, use the last 4 digits (example, press x7890 instead of 410-740-7890).

**Note:** Throughout this handbook, internal hospital numbers appear in blue, outside numbers appear in black.

### Quick Guide

**Alarms, Call Buttons, Emergency, Safety**
- We recognize your family members may notice changes in your condition that may not be apparent to staff. Ask your family to talk with a nurse right away if they have concerns or call the nursing shift director, **443-718-2424** (or x2424). If they notice a sudden change that requires immediate attention, they should call **x5555** on any hospital phone.
- If an alarm in your room sounds and you think your nurse has not heard it, use the call light or call your nurse’s phone. Alarms are included on IV pumps, cardiac monitors, call lights, bed exit alarms and patient electronic monitoring units.
- If you need help getting out of bed, push your call button for assistance from a staff member.
- The hospital holds periodic drills. If you hear the alarm, remain in your room. Our highly trained staff will provide you with instructions. In the event of a real emergency, it is standard procedure for staff to shut your door.
ATM Machine (main lobby)

Cafeteria (ground floor)
Hot Breakfast: 7-10 a.m.
Lunch: 11 a.m.-3 p.m.
Dinner: 3-8 p.m.
Vending machines are outside of the cafeteria.
Patients can also use an app to order from our hospital kitchen. For details, visit hcgh.org/dining.

Chaplaincy Services
• Services for you and your family include pastoral and spiritual care, grief counseling, sacramental ministry, advance directive consultation, palliative medicine consultation, interdisciplinary consultation, liaison services with clergy of many faiths and 24-hour emergency coverage. Call 410-740-7898 (or x7898) or ask your nurse.
• An interfaith chapel (first floor) is open 24/7 for prayer and meditation.

Gift Shop (main lobby)
• 9 a.m.-8 p.m., Monday-Friday;
  10 a.m.-5 p.m., Saturday;
  11 a.m.-5 p.m., Sunday (Please note, hours may change during COVID-19.)
• Call 410-740-7985 (or x7985) to make a purchase delivered to a patient room.

Interpreters
• American Sign Language and world language interpreting is available 24/7. Notify your nurse.
• More details: pg. 7 or hcgh.org/interpreter.

Patient Meals
• Call 443-718-3663 (or x3663, xFOOD) to order meals from 6:30 a.m. to 6:30 p.m. Meals will be delivered in one hour or less. A doctor’s diet order may limit your meal choices.
• Guest meals are available for an additional fee, charged to your hospital bill.

Phones
• Internal call: press last 4 digits
• Local call: press 9 + area code + phone number
• Long distance: using a credit card, operator assistance, third-party bill or collect: 9+1-800-213-9487; calling card, 9 + follow card instructions
• To protect the performance of nearby medical equipment and devices, keep cell phones at least three feet from medical equipment.

Personal Items
• If needed, ask your nurse for a toothbrush, toothpaste, comb, tissues, shampoo or shaving cream. Soap is provided.
• Home medications and personal electrical appliances such as hair dryers, electric razors and TVs are not permitted. Personal laptops, cell phones, battery-operated radios and tablets/iPads may be used.
• HCGH is not responsible for personal belongings, including damage to or loss of money, jewelry, dentures, clothing, hearing aids, prostheses, etc. Personal/valuable items should be sent home.

Visitors
• Family and primary support persons (as defined by you) are welcome at any time.
• General visitation hours for other visitors are 9 a.m. to 9 p.m. (Please note, policies may change during COVID-19.)

Video
• Video and/or recording devices are prohibited, with the exception of the Maternal Child Unit (see pg. 9). Video/audio recordings by law enforcement may occur in the hospital.

WiFi, TV
• Complimentary wireless internet access is available to patients and visitors.
• Television service includes popular cable channels (see prior page).

Your Room
• Beds are fully adjustable, and automatically and periodically inflate and deflate. They may be adjusted for sitting up or reclining. Side rails contain controls for the bed, TV and nurse call button. If you have difficulty reaching the controls, ask the nurse for a control box that can be clipped to your pillow.
• If you would like the room temperature adjusted, ask any member of our team.
• Housekeeping is available 24/7.
Call 443-718-2272 (or x2272) with any concerns.
Welcome

Welcome to Howard County General Hospital, where providing excellent health care to our community is our number one priority. Our goal is to give you the kind of care we would want for ourselves and our families.

We want you to take an active role in your care and recovery. Speak freely and ask questions about any concerns or anything you do not understand. We are always here to answer your questions.

First and foremost, we want to ensure you have a delightful experience and receive safe, high-quality care while you are in the hospital, and to make sure you are healthy and back home with your family as quickly as possible. We want each patient to have a delightful experience every time.

Thank you for trusting HCGH with your health care needs. We hope this patient handbook provides useful information about how you can participate in your care.

Sincerely,

M. Shafeeq Ahmed, M.D., MBA, FACOG
President, Howard County General Hospital: A Member of Johns Hopkins Medicine

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For your health & safety during your stay

At Howard County General Hospital, your safe care and well-being are important to us. Read the following information carefully. Within 24 to 48 hours, a member of our care team will review this information with you and your family so you fully understand the measures we take to provide you with safe, high-quality care during your visit.

Be an Informed Patient
Because we believe an informed patient can more fully participate in his or her own care and recovery, we want to involve and educate you throughout your hospital stay. You have the right to be an active participant in your health care, and we want you to discuss any treatment or surgical procedure thoroughly with your doctor. You should ask questions about unfamiliar terms or abbreviations to be sure you know exactly what will be done. Read consent forms completely and ask any questions you may have. No question is unimportant. Your nurse can help you get in touch with your doctor.

Advance Directives
An advance directive can be used to name a health care agent, someone you trust to make health care decisions for you if you are unable to do so. It can also be used to state what your preferences are about treatments that may be used to sustain your life. Advance directives are optional. If you have one, please let your nurse know and have someone bring it to the hospital during your stay so we can have it on file. An advance directive can be removed or revised at any time.

Having your advance directive on file at the hospital allows providers to follow your wishes if you are ever at the hospital and unable to communicate. For more details, visit hcg.org/careplanning, email HCGH-ACP@jhmi.edu or call 443-518-6684.

Health Buddy
You should designate a friend or family member who can help make decisions and coordinate your care after surgery, if needed. Depending on your stay, this may include physical assistance immediately after leaving the hospital, helping to prepare your home for your return, and handling medications and appointments.

Participate in Your Bedside Shift Report Discussion
The Bedside Shift Report occurs when nurses or patient care technicians, who are going off duty and coming on duty, meet by your bedside and talk with you about your care.

As with all aspects of your care, we want you and your family to be involved in these shift changes. This can only improve our ability in making sure you receive the highest-quality care.

Help us help you. Participate in the Bedside Shift Report discussion and ask questions about your care. **Bedside Shift Report usually occurs between 7-7:30 a.m. and 7-7:30 p.m., lasting about five minutes.**

What happens during Bedside Shift Report?
- You are introduced to your next nurse or patient care technician coming on duty.
- The new nurse’s or patient care technician’s name is written on the white board on the wall of your room.
- You are asked about your health, and your plan of care for the upcoming shift is discussed.

**everyBODy moves Mobility Initiative**
Mobility and exercise are important parts of your recovery. Why should everybody move? It decreases your risk for blood clots, infections, bed sores and constipation and it can improve your mood and appetite. Your care team is here to help you heal, which includes helping you stay upright and active. Together, you will set a mobility goal each day to reach your highest level of mobility.
Confirm Your Identity for Procedures and Medications
We take many safety precautions to ensure your doctor performs the correct procedure and you are given the correct medication. Upon arrival, you receive an ID bracelet with your name and birth date that must be worn at all times during your stay. Staff should always ask you to state your name and birth date, and should check your ID bracelet before giving you medication or performing any test or procedure. You can also expect the staff to scan your bracelet before giving you medication. We use bar code technology to help ensure your medications are matched to you.

For surgical procedures, you will always be asked to confirm the procedure you are to undergo and where on the body it will take place. The area of your procedure should always be “marked” prior to surgery. Our team calls a “time out” to perform additional checks to ensure your safety. If you leave your room for anything other than a scheduled procedure, let your nurse know your location.

Seek Assistance for Changes in a Patient’s Condition
We are partners with families in providing care, and we recognize the family may notice changes in their loved one’s condition that are not apparent to staff. If you have concerns about these changes:

• talk with your nurse, charge nurse or nurse manager
• or call the shift director at 443-718-2424 (or x2424).

For immediate attention, call x5555 on any hospital phone and provide your name and room number. A skilled medical and nursing team will respond.

Manage Your Pain
We work with you to manage your pain and make you as comfortable as possible. You can expect our staff to frequently ask you about your pain level using a standard pain scale. Your response helps your nurse and doctor decide on the most effective medicine/method to control or reduce your pain. Speak with us about your pain and what helps you control it. It is important to tell us where you are feeling pain, and if you experience a new pain or worsened pain. If you have questions about the pain management options available to you, ask your nurse or doctor.

Help Prevent the Spread of Germs
Infection can occur after many types of medical procedures. Specific precautions should be taken for viruses such as COVID-19 and flu. Refer to the enclosed flier about COVID-19 precautions.

To help protect you from infection, our employees:

• use an alcohol-based hand cleaner or wash their hands with soap and water before and after having contact with you; if you are not certain they have cleaned their hands, ask them to do so
• wear gloves to prevent the spread of infection while drawing blood and during certain procedures
• receive annual flu vaccinations.

Follow these tips to protect yourself from infection:

• clean your hands after handling soiled material or using the bathroom
• cover your mouth with your elbow when you sneeze or cough
• properly throw away tissues
• keep the skin around intravenous (IV) fluid or medication dressings clean and dry
• contact your nurse promptly if a wound or dressing becomes loose or gets wet
• notify your nurse promptly if a catheter or drainage tube becomes loose or detached
• carefully follow your doctor’s instructions regarding breathing treatments and getting out of bed
• discourage ill family and friends from visiting you
• ask family and friends who are visiting you to wash their hands before and after their visit.

If your condition requires isolation, you and your family will receive instructions from your nurse.

Avoiding Harmful Swallowing
If you are having trouble swallowing, your nurse may identify you as having nothing by mouth, also known as NPO, meaning you are not allowed to have anything to eat or drink, including water and ice chips. We understand
you may be hungry or thirsty, but food and drink can enter the windpipe, which can lead to choking, pneumonia and other serious medical conditions.

If you take daily medications, your provider will temporarily change how you take your medicine. You will be able to eat and drink after a speech language pathologist evaluates you and determines safe food and drinks for you to consume.

**Preventing Injuries from Falls**

You have a higher risk of falling in the hospital if you:
- recently fell
- need help walking
- have more than one health problem or have an IV or tethered wires/cables
- have new medications or experience a change in dosage.

We use the following “fall prevention” precautions to help decrease the risk of falls:
- making rounds hourly during the day and evening (if you think you may need to use the bathroom, tell your caregiver early so he/she can assist you before the need becomes urgent)
- providing non-skid socks
- keeping the top two side rails on your bed in the “up” position
- keeping your call button within easy reach, making sure it works and you know how to use it
- keeping your bed exit alarm on (the alarm sounds if you get up without help; some units also have chair alarms)
- keeping your bed in the low position and locked in place
- notifying your nurse if you will be alone after visitors leave.

**Alarms**

If an alarm in your room sounds and you think your nurse has not heard it, use the call button or call your nurse’s phone. Alarms are included on IV pumps, cardiac monitors, bed exiting and telemetry units (where patients require electronic monitoring).

**Emergency Response Procedures**

In an effort to maintain a high level of preparedness, the hospital routinely conducts drills and exercises (e.g., fire and emergency drills). If you hear an alarm or announcement, remain in your room. Our staff will provide you with instructions, and may shut your door or take other actions to provide for your safety. In the event of an actual fire, our staff and fire personnel will determine the safest location and assist you if relocation is necessary.

**Report Patient Safety Concerns**

If at any time you or your family have questions regarding your experience, contact the Patient Relations Department at 410-720-8200 (or x8200).

**Understand Your Medications**

During the first day of your hospital stay, we obtain information about your medicines taken at home. Always inform your doctor or nurse about all prescription, non-prescription, vitamin and herbal medications you are taking, as well as any allergies or reactions you have had to medication, anesthesia, food and vitamin supplements. Even though you may have been using these medicines for some time, you might have questions or concerns about them or about possible interactions with new medicines.

To help your nurse complete your medication list, you or a family member may bring in your medications, but they must be returned home after the list is complete. For your safety, no medications are allowed to stay at your bedside. In very limited circumstances where the hospital does not stock a medication, home medications may be used. If this is the case, a member of your health care team will properly store the medication and give it back to you prior to your leaving the hospital.

Understanding your current medicines and learning about new medicine you are to take after you leave the hospital is important to a successful recovery. Taking medicine properly is not always easy and sometimes information is confusing. The more you know about your medicines, the easier it is to take them correctly.
We encourage you to ask your health care team:
- What is the name of the medicine and why am I taking it?
- When and how do I take it, and for how long?
- Are there foods, drinks or activities I should avoid while taking this medicine?
- Are there side effects and what should I do if I experience them?
- Will this new medicine work safely with other medicine I take?

For your comfort

Personal Items and Securing Your Valuables

Grooming Items
For your comfort, you may want to bring your own personal grooming items to the hospital. If you are unable to do this, we will be happy to provide you with such items as a toothbrush, toothpaste, comb, tissues, shampoo and shaving cream. Simply ask your nurse for assistance. Soap, towels, sheets and hospital gowns are provided.

Electronic Items
For the safety of all our patients, personal electrical appliances such as hair dryers, electric razors, radios and televisions are not allowed within the hospital. Laptop computers, cell phones and battery-operated radios with headphones are allowed, but remain your responsibility.

Securing Personal Items
Personal items and valuables should be sent home with a family member or friend for their safekeeping. Be careful with dentures, eyeglasses, hearing aids or other devices. If you have dentures, store them in a denture cup. Keep other items in a safe place. Do not leave these items on your meal tray or wrapped in tissue on your bedside table to avoid accidentally losing them.

Your nurse can give you a bag for clothing and personal items. Mark the bag with your name and room number. Do not put anything of value in tissues, paper towels or a regular trash bag.

If you are unable to send valuables home, you may call Security at 410-740-7911 (or x7911) and ask that your valuables be placed in the hospital's safe.

The hospital is not responsible for your personal belongings and does not reimburse for lost, stolen or damaged personal belongings, including hearing aids, dentures, eyeglasses, contact lenses, jewelry, clothing, prostheses (for example, an artificial leg) or other articles of value and loss of money.

Your Bed
Your bed is fully adjustable. It will automatically and periodically inflate and deflate, and you may hear this sound and experience this change in your mattress. This important safety measure supports good circulation and helps prevent pressure sores from developing. If your doctor permits, it may be adjusted for sitting up or reclining.

The upper side rails are generally kept in an “up” position so you can reach the nurse call button and bed controls or use the rails to hold onto to get out of bed or reposition yourself. For your safety, do not try to lower the rails yourself or climb over them. If you need help getting out of bed, use your call button and a member of your health care team will respond.

The controls for your bed, television and nurse call button are on the bed’s side rails. If you have difficulty reaching the controls, ask the nurse for a control box that can be clipped to your pillow.

Patient Meals
Our room service program offers greater flexibility with your meal times and selections. After your doctor prescribes a diet that meets your medical needs, you may order your meal by calling 443-718-3663 (or x3663, xFOOD) from 6:30 a.m. to 6:30 p.m. A doctor’s diet order may limit your meal choices. Meals will be delivered in one hour or less.
Patients can also use an app to order from our hospital kitchen. For details, visit [hcgh.org/dining](http://hcgh.org/dining). Guest meals are available for an additional fee, charged to your hospital bill. If you have special dietary needs or restrictions, inform your nurse.

Visitors are welcome to bring food for you, but it needs to be cleared with your nurse first. This ensures the food is part of your recommended diet and supports your safety and continued care.

**Visitors**

HCGH applies a patient- and family-centered philosophy to our care, and we recognize the important role family and friends play in the healing process. We try to make our visiting hours as flexible and patient-centered as possible. Family and primary support persons (as defined by you) are welcome to visit at any time.

The hospital welcomes a family member, friend or other individual of your choosing to be with you during your stay for emotional support, unless the visitor's presence takes away others’ rights for safety, health or is not in your best interest. The visitor may or may not be your surrogate decision-maker or legally authorized representative.

General visitation hours for visitors, other than family or primary support, are 9 a.m.–9 p.m. We request that you and your visitors respect our quiet hours between 9 p.m. and 6 a.m. There are some areas where a patient request, clinical needs or unit logistics require visitation limitations. Speak to your nurse about any limitations that might exist in your area. *For your safety, we strongly recommend that anyone who is ill not visit you.* Please note, policies may change during COVID-19 pandemic.

You or your support person have the right to deny consent for visitation at any time. If you lack decision-making capacity for the purposes of determining who may visit, your support person may exercise visitation rights on your behalf. If a visitor displays unsafe, threatening or aggressive behavior, security measures will be taken to protect our patients and staff. All visitors must receive a visitor’s sticker from the Information Desk in the main lobby and wear it while in the hospital.

**Chaplaincy Services**

Spiritual care services are available 24 hours a day to you and your family for emotional and spiritual support, regardless of your religion. A Roman Catholic priest and a Jewish rabbi are part of our volunteer staff, as are a variety of Protestant clergy. Clergy from many other faith communities in the area are available, too. Chaplains can contact your clergy.

An interfaith chapel, located on the first floor near the Chaplaincy Services office, is open 24 hours a day for prayer and meditation. We offer the following services: pastoral and spiritual care, grief counseling, sacramental ministry, advance directive consultation, palliative medicine consultation, interdisciplinary consultation and liaison with clergy of many faiths. To arrange for a pastoral visit, call 410-740-7898 (or x7898), or ask your nurse.

**Member Care Support Network**

The Member Care Support Network offers free non-medical support services, such as social support, transportation and connections to community resources, through specially trained volunteers called Community Companions. Adults who live or worship in Howard County can enroll in this program to receive assistance after a hospitalization. Call 410-720-8788, email [hcgh-j2bh@jhmi.edu](mailto:hcgh-j2bh@jhmi.edu) or visit [hcgh.org/mcsn](http://hcgh.org/mcsn).

**Room Temperature**

If you have concerns about your room’s temperature, ask any member of our team to adjust the thermostat.

**Housekeeping**

Housekeeping is available 24 hours a day. For the health of our patients, the hospital uses a microfiber cleaning system that removes germs that other cleaning tools miss. If you find your room in need of cleaning or supplies, call Housekeeping at 443-718-2272 (or x2272).
Local Calls and TV Service
HCGH provides complimentary local phone and TV service in all patient rooms except those located in the ICU and Psychiatric Unit. Television service includes popular cable channels (see the inside cover of this booklet). To make a local call, press 9 + area code + phone number.

Long Distance Calls
You are responsible for any long distance calls made during your hospital stay. You may use a credit or calling card, place a collect call or arrange for an operator-assisted third-party bill*.

Long distance phone call instructions:
• credit card, operator assistance, third party bill or collect calls: press 9 + 1 + 800-213-9487.
• calling card: press 9 and follow instructions on the card.

*Operator-assisted third-party calls are charged at higher rates. Check the rates before calling.

Wireless Internet Access
HCGH offers complimentary wireless internet access. Simply connect to JHGuestnet on your wireless device. You will have access to an open, non-secure wireless network on your wireless device. Our Information Technology staff is unable to provide technical support for personal wireless devices.

Cell Phone Use
Because we understand you and your visitors need to communicate with loved ones and associates, we permit cell phone use in the hospital. However, to protect the performance of nearby medical equipment and devices, keep cell phones at least three feet away from medical equipment.

Educational Resources
A variety of instructional videos are available through the electronic medical record and MyChart Bedside (see pg. 13). Written educational resources are also reviewed and provided at the time of discharge.

Get Well Greetings and Special Restrictions
If your condition permits, family and friends may send cards, flowers, latex-free balloons or fruit baskets. Food needs to be sent home within 24 hours. If flowers arrive after you leave the hospital, we will notify the florist of your release so they can be delivered to your home.

For the safety of all our patients, the following restrictions apply to these units:
  Intensive Care Unit: Fresh flowers, balloons and fruit baskets are not allowed.
  Oncology Unit: Fresh flowers and fruit baskets may be restricted. Check at the nurse’s station before bringing them into the patient’s room. Silk flowers and latex-free (Mylar®) balloons are allowed on this unit.

Campus Amenities

A Different Kind of Hospital Cafeteria

Food Options for Visitors
We know that having a loved one in the hospital can be stressful and having time to eat a meal can be limited. Now, visitors and family members have a wide variety of delicious food to choose from in the brand new cafeteria, located on the ground floor of the hospital. Offerings include made-to-order gourmet pizzas in a quick-cooking brick oven, deli sandwiches and wraps, build-to-order salads with 60 topping options, freshly rolled sushi, grilled burgers and a freestyle soda machine with more than 110 healthy beverage choices.

To make your hospital visit easier, we offer online ordering and locker pick up as well. (See inside cover for cafeteria hours. See page 4 for patient meal information.) Visit hcg.org/dining for more details on the app for ordering.
**Vending Services**
Vending machines offering a range of quick food and drink options are located outside the cafeteria.

**The Right Touch Gift Shop**
This full-service gift shop is in the hospital’s main lobby and offers a wide variety of merchandise for patients and visitors, including gifts, flowers, cards, toiletries, sodas and snacks. Hours are Monday-Friday: 9 a.m.–8 p.m.; Saturday: 10 a.m.–5 p.m.; and Sunday, 11 a.m.–5 p.m. Due to the COVID-19 pandemic, hours are subject to change. Call 410-740-7985 (or x7985) to make a purchase. Gifts or purchases are brought to your room if they conform to your treatment plan. Family members also may choose an item to be delivered to their loved one. Visit [hcgh.org/giftshop](http://hcgh.org/giftshop) to see what gift items are available.

**Automated Teller Machines**
For your convenience, an ATM is located in the main lobby.

**Policies and Special Services**

**Advanced Disease and Symptom Management (Palliative Care)**
Patients with advanced, debilitating or chronic illness such as heart disease, cancer, Parkinson’s disease, kidney failure or lung disease can benefit from ADSM. This can improve quality of life, focusing on:
- relieving pain and other uncomfortable symptoms, such as shortness of breath
- assisting advance care planning by increasing a patient’s knowledge of their disease, prognosis and treatment options
- supporting family members who are overwhelmed by navigating the health care system
- counseling patients and family members experiencing emotional and spiritual suffering.

*How does ADSM differ from hospice?*
ADSM and hospice share a common philosophy that focuses on patient and family comfort values. However, ADSM is provided at any point in a patient’s disease course, from diagnosis onward. It can be combined with curative treatments or be the sole focus of a patient’s care.

For a consultation, ask your doctor to call the Advanced Disease and Symptom Management service at 410-720-8500 (or x8500). The consultation requires a written or verbal order from a doctor.

**World and Sign Language Interpreters**
American Sign Language and world language interpreters are available for patients and family members 24 hours a day, seven days a week by notifying the patient’s nurse. **Even if you insist upon the use of a family member/friend to assist with interpreter services, our staff must have the interpreter remain to ensure the information being communicated is accurate.**

We offer several options for quick, immediate interpretive services to patients and families who are deaf, hard of hearing or have limited English proficiency, including: video remote interpreter devices, telephone interpreting devices and in-person interpreters. For more information, visit [hcgh.org/interpreter](http://hcgh.org/interpreter).

**Helping Patients Communicate**
If you or your family member cannot speak due to illness or injury, our nursing staff will help identify your communications needs so all caregivers and service providers can effectively care for you. Ask for assistance and we will recommend effective communications tools to ensure you have a say in your care.
**Service Animals**
Your service animal is permitted during your inpatient or outpatient visit to the hospital. Your animal must be trained to do work or perform tasks for you as an individual with a disability. A service animal is welcome in the hospital if it is housebroken, poses no health risk and you are able to control it.

**Service Animal Care**
You are responsible for the care and supervision of your service animal. This includes toileting, feeding, grooming and veterinary care.

Remember to bring food, bowls, a leash for walking and plastic bags for pet waste. Bags need to be placed in our outside trash cans. A pet relief area is available outside near the sculpture, close to the hospital’s front entrance.

Your service animal should remain leashed, unless it conflicts with performing its job. When your service animal is off its leash, it must be under your control at all times either by voice or other command.

**Arrival/Returning Requirements**
We do not require specific documentation, though if it is not obvious that your animal is a service animal, you may be asked the following questions:

- Is the animal a service animal required because of a disability?
- What work or task has the animal been trained to perform?

When your service animal leaves the hospital, Security needs to be informed to allow the service animal to return. Your family member should provide your room location and identify themselves.

For your safety and security during your stay with us, you should arrange for family to assist with the care of your service animal. If your service animal is sick, speak with your veterinarian before bringing it to the hospital. If that is not possible, we will find an animal sitter or, if needed, arrange to board your animal. You are responsible for paying the sitter and boarding costs.

**Permitted and Non-permitted Locations**
Your service animal is allowed to be with you in all public and patient-allowed areas of the hospital. It cannot be in sterile areas (such as an operating room and certain intensive care units), near MRI machines and other areas determined to be unsafe for patients and/or service animals.

**Vaccinations**
Your service animal is subject to the same animal control, public health and licensing requirements as all animals in the local town, county and state. For example, if a town requires all animals be vaccinated, your service animal must be vaccinated. In Maryland, dogs that are four months old or older must be adequately vaccinated against rabies.

**Help Make Care Decisions – Ethics Committee**
The Ethics Committee is available if you need help making difficult decisions regarding your care or the care of a loved one. These decisions may involve resolving differences of opinion between family members about continued life support or helping you understand the options your doctor has offered. We encourage patients and their families to seek advice from the Ethics Committee when appropriate. To reach a member, call 410-720-8226.

**Grievance Process**
It is the goal of the HCGH staff to provide the best service possible to our patients and their families. If you have any concerns about the care or service you are receiving, bring them to the attention of the unit’s nurse manager as soon as possible. We want to remedy the issue promptly, and the nurse, charge nurse, nurse manager or shift director on duty can usually resolve your issue at the time it happens.

If you are uncomfortable speaking directly to unit staff, or if your concerns have not been resolved to your satisfaction, contact Patient Relations to speak to one of our patient representatives at 410-720-8200 (or x8200) between 8:30 a.m. and 5 p.m., weekdays. For concerns during non-business hours, you may leave a message that will be
returned the next business day, or contact our shift director by calling the operator at 410-740-7890 (or x0). You are welcome to put your concerns in writing: Patient Relations Department, Howard County General Hospital, 5755 Cedar Lane, Columbia, MD 21044, HCGHPatientRelations@jhmi.edu. (See Patient Rights and Responsibilities, pgs. 16-17.)

**Non-Discrimination Policy**
It is our policy to provide services to all regardless of age, race, national origin, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression, veteran status, HIV infection/AIDS-related conditions or any other protected classifications identified under applicable federal, state and local laws, regulations or statutes. Howard County General Hospital does not discriminate against visitors based on any of these protected classifications.

**Smoke-Free Campus**
Smoking, including the use of electronic cigarettes, is not permitted on HCGH property.

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**Financial and Insurance Information**

**A Respectful and Caring Environment for All**
As a community hospital in an especially diverse community, building trust and showing an understanding of other cultures and perspectives is essential to delivering an extraordinary experience for patients, professional staff, employees, volunteers and community members.

HCGH is a place of caring and healing for patients, visitors and staff alike. You are expected to treat hospital staff, other patients and visitors with courtesy and respect in verbal and/or physical interactions; abide by all hospital rules and safety regulations; and be mindful of noise levels, privacy and number of visitors.

If your preference, with respect to the hospital’s personnel, is based on any of the non-discrimination categories above, the hospital will not support your preference unless it is allowed as a Bona Fide Occupational Qualification. For example, gender preference may be a justified accommodation to protect personal or religious convictions about modesty. It is the hospital’s policy to advise you to seek care elsewhere if you wish to assert a preference not protected by law.

**Photography and Video Recording Devices**
Our goal is to protect the privacy of all individuals at the hospital. For this reason, you and your visitors, including family members, are not permitted to photograph, video and/or audio record any individual at the hospital using an electronic media device without the individual's written and/or verbal consent. Photographing and recording without consent will result in being asked to delete the files.

**Labor and Delivery**
Requests for still photography should be made with your physician or nurse midwife in advance of your delivery. Still photography is allowed, as directed by your physician or nurse midwife, in the following locations: labor room, birthing/delivery room and operating room.

Still photography is at the discretion of your physician or nurse midwife. You and your family must comply if they request discontinuing the use of photography devices. Video recording is not permitted in the labor, birthing/delivery and operating rooms until you have received approval by our delivery staff and are in the postpartum phase. Photos and videos may be taken in the privacy of your postpartum room. Visitors must have consent from the newborn’s parents or guardians for newborn or bereavement photography.

**Video and Audio Surveillance**
Video and/or audio recordings by law enforcement may occur in the hospital.
**Discounted Rates**
A two percent discount is offered if you pay the full amount of your hospital bill at discharge. A one percent discount is offered when full payment is received within 30 days of leaving the hospital.

**Financial Responsibilities**
Your hospitalization will be classified as either an inpatient or outpatient observation or extended surgical recovery admission.

**Inpatient**
If admitted as an inpatient, you will be registered as a hospital inpatient and charged room and board.

**Outpatient Observation or Extended Surgical Recovery**
If your doctor orders “observation” or “extended surgical recovery” services, you may receive services in a standard inpatient bed, although you are registered as a hospital outpatient and not charged for the cost of an inpatient bed and associated admission charges.

As an outpatient, you are responsible for the related co-pay and/or deductible charges that apply to the outpatient level of hospital care. An outpatient observation stay does not count toward the three-day qualifying inpatient stay required for Medicare Part A coverage in a skilled nursing facility after discharge. Ask to speak to your case manager if you have any questions.

It is important for you to discuss your estimated length of stay, as well as anticipated tests and services, with your doctor. Many insurance carriers have coverage limitations on certain tests, services and procedures. Once we receive your insurance information, specialists in our Financial Clearance Department will verify your benefits.

For scheduled admissions or surgery, if your insurance will not fully cover your estimated charges—including deductibles, co-payments and co-insurance amounts—you will need to pay for your estimated portion prior to or on the day of admission to the hospital. The hospital welcomes MasterCard, Visa, Discover and American Express. The Patient Financial Services Department will file your insurance claim with your carrier.

**Doctor Fees**
The hospital bill does not include doctor fees. You will receive separate billing statements from each doctor who provides a service to you during your stay. Doctors who may participate in your care include, but are not limited to, your attending doctor, surgeon, hospitalist and/or intensivist, consulting specialist, anesthesiologist, emergency doctor, pathologist, radiologist or neonatologist.

**Payment Liability**
In cases involving admission due to personal injury and possible liability, the hospital must still look to you, the patient, for payment, regardless of circumstances since any insurance settlement will be made directly with you and not with the hospital. Our financial counselors can work with you to arrange payment plans.

**Financial Assistance**
HCGH provides necessary emergency medical care to all people regardless of their ability to pay. Financial assistance is available if you cannot pay the total cost of hospitalization due to lack of insurance coverage and/or inability to pay. If you do not have insurance, call our financial counselor at 410-740-7675 (or x7675) to schedule an interview to determine payment arrangements and/or complete a Medical Assistance Application.
Before You Leave the Hospital

Your HCGH care team is concerned about your well-being during your stay and about your care when you return home. Our goal is to make the transition back to your normal life as easy as possible and to help ensure you will not need to return to the hospital.

Discharge Planning
Discharge planning is initiated upon admission. Your attending doctor decides when you are ready to be discharged from the hospital. Most make the final decision to discharge patients in the morning. If you disagree with your doctor’s decision, you may ask your nurse to contact Case Management. Case managers and social workers can help arrange for discharge to another facility, such as a nursing home or rehabilitation facility. They also help arrange for home nursing care, or home health care equipment or supplies if needed.

Understanding Your Discharge Care
You and your nurse review your discharge instructions and information about your care at home or what to expect if you are transferring to another location. A copy of the instructions are given to you in a discharge envelope. Make sure you understand the instructions, including those regarding medications and information about any follow-up physician visits. Be sure you obtain a phone number to call if you have questions. Do not hesitate to ask questions.

When you are ready to leave the hospital, a nursing staff member or volunteer accompanies you to your vehicle. If you do not drive or if you have a procedure that makes it difficult or impossible for you to drive when you leave, arrange for a family member or friend to take you home.

Following discharge, a Patient Access Line nurse will call you to review your condition, medications, instructions and any concerns.

Understanding Your Medications
Our goal is to provide you with information you need about your medicines before you leave the hospital. You can expect us to:

- talk with you about your current and new medicine so you understand what the medicine is and why it’s been prescribed
- include your family member(s) or others whom you want to also receive information about your medicine (tell us if there is someone who should also receive this information)
- provide you with prescriptions for new or changed medicine and written information about the medicine you should be taking when you are discharged from the hospital
- provide a medication list with the names, doses, routes and frequencies of the medications you should take after discharge from the hospital.

Write down the next time your medications are due to be taken after you leave the hospital. Use space provided on pg. 22 to record this important medication information. You need to take this list to your primary care physician at your next appointment. When you leave the hospital:

- give your primary care provider and any specialists an up-to-date list of the medications you are taking
- update your medication list when medications are discontinued, added or doses are changed
- carry your medication information with you at all times so it can be provided to your caregiver in the event of an emergency; include over-the-counter medications and herbal supplements you take when making your list, as these can cause interactions with other medications.

Take the worry out of filling your prescriptions when you are ready to be discharged. We offer free same-day medication delivery to your home through the Johns Hopkins Pharmacy. Talk to your nurse or care provider to request this service. Call 443-718-2295 with further delivery service questions.
Find a Doctor
Visit hcgh.org/findadoctor to find primary care providers and specialists.

Rehabilitation Services
If you are in need of rehabilitation or other outpatient services after leaving the hospital, we offer physical therapy, occupational therapy, speech-language pathology, cardiac and pulmonary rehabilitation, and wound care services. We also offer lab and infusion services. For more information, visit hcgh.org/outpatient.

Community Care Team
The Community Care Team (CCT) provides support and coordination after a hospital stay, making it easier to manage a health condition and the hospital-to-home transition less stressful. CCT provides the following free services to adult Medicare beneficiaries who live in Howard County:
- teaches you to effectively manage your illness so you feel confident doing so on your own
- coordinates care with your primary care provider and specialists
- acts as your personal health care advocate
- connects you with community services
- facilitates your health care activities
- guides you on how to take prescribed medications.

For more information, call 410-720-8788 (or x8788), email hcgh-cct@jhmi.edu or visit hcgh.org/cct.

Feedback on Our Services
It is our goal for you and your family to be completely satisfied with all aspects of our service. We make every effort to provide the best possible care, and do so with the utmost concern for your comfort, privacy and dignity. Soon you may receive a patient satisfaction survey in the mail about your experience with us. If you receive a survey, we thank you in advance for taking the time to complete it. We care very much about your comments because they help us improve our service to others. Your feedback also helps us train and recognize our staff.

Patient Choice Statement
Your doctor may prescribe facility or home care services or equipment to assist you in the transition from hospital to home. Should your doctor order such services, we arrange all referrals to meet your facility or home care needs, according to your choices.

By federal law, you have the right to select your after-hospital care providers. However, your insurance company may have preferred providers with whom they have a contract. If you choose another care provider, this may affect your insurance coverage.

We can make arrangements with the following:
- Johns Hopkins Home Care Group, a full-service provider of home health services, infusion therapy, medical equipment and respiratory services, which is owned jointly by Johns Hopkins Health System and Johns Hopkins University
- Potomac Home Health, a full-service provider of home health services, which is owned jointly by Sibley and Suburban, hospitals within the Johns Hopkins Health System
- Gilchrist Hospice Care for hospice care, our hospice affiliate.

We maintain a full list of local providers, which will be provided to you, though you may be familiar with a provider from prior experience.

Our intention and desire is for you to have a smooth, safe transition back home, secure in the knowledge of your follow-up care. If you have any questions, contact your doctor, nurse, case manager or social worker. The hospital makes no representations as to licensure or quality of care nor does it recommend or endorse any agency.
Recognize and Honor a Caregiver
After their stay, many of our patients ask us what they can do to help the hospital. HCGH welcomes the support of its neighbors, whether through volunteer efforts or monetary contributions. Through the generosity of donors, the Howard Hospital Foundation helps HCGH respond to the health care needs of our community. Your gift, large or small, has a positive impact.

Whether you provide a cash donation or give to the Honor a Caregiver Program, your gift makes a difference in the lives of those served by the hospital each year. To support the hospital, visit hchh.org/give or call 410-740-7840 (or x7840).

Resources for Cancer Patients
The Claudia Mayer/Tina Broccolino Cancer Resource Center at Howard County General Hospital offers hope and support to cancer patients, families and care givers. The center is designed to assist individuals and families through counseling, stress and symptom management, care planning, system navigation, education, aesthetic services and resource identification. We connect persons diagnosed with cancer, and their families, with essential community, state and national resources.

Cancer patients and their families sometimes need help coping. Whether you are facing the uncertainty of a new diagnosis and treatment, feeling overwhelmed or adapting to life after cancer, we can help. Our social workers are there to offer assistance, connect you with resources, teach coping skills and provide emotional support individually or in a group setting.

Our center is now offering additional integrative medicine services, including acupuncture, massage, nutritional consultations and therapeutic yoga. The expanded range of therapies are available for cancer patients and those without cancer and are being offered in collaboration with providers from the Maryland University of Integrative Health, a graduate university in Laurel that educates practitioners. For an appointment, call 410-740-5858.

The DAISY Award® for Nurses
Share your appreciation by nominating one of our nurses for the DAISY Award®, honoring them for their extraordinary work or service. Visit hchh.org/DAISY for details.

Enroll in the MyChart Patient Portal
MyChart is a secure website that provides you your medical information about your Johns Hopkins care, including care received at HCGH.

Use MyChart to:
- monitor your health care more closely
- view portions of your medical record, including many test results, diagnoses and medications
- view a summary of your visits and post-appointment instructions.

Sign Up for MyChart
Log onto mychart.hopkinsmedicine.org and follow the steps to enroll. You will be required to enter your contact information and verify your identity to create an account. Otherwise, an activation code is provided on your After Visit Summary following an appointment, emergency room visit or hospital stay at a Johns Hopkins Medicine facility which you can use to sign up as well (within 45 days of the visit), also at mychart.hopkinsmedicine.org.

MyChart Access
MyChart accounts can be established by anyone age 13 or older who is a patient at HCGH. Parents, family members, legal representatives and others may also obtain a MyChart account if they become authorized as a proxy to access a patient’s medical record for approved purposes. In all cases, a form must be completed before proxy access can be granted. This form is available at the Patient Access Department, 410-740-7670 (or x7670).
Howard County General Hospital
Patient Rights and Responsibilities

You or your designee have the right to:

Respectful and Safe Care
1. Be given considerate, respectful and compassionate care.
2. Have a family member/friend and your doctor notified when you are admitted to the hospital.
3. Be given care in a safe environment, free from abuse and neglect (verbal, mental, physical or sexual).
4. Have a medical screening exam and be provided stabilizing treatment for emergency medical conditions and labor.
5. Be free from restraints and seclusion unless needed for safety.
6. Know the names and jobs of the people who care for you.
7. Know when students, residents or other trainees are involved in your care.
8. Have your culture and personal values, beliefs and wishes respected.
9. Have access to spiritual services.
10. Have conversations with the Ethics Service about issues related to your care.
11. Be treated without discrimination based on race, color, national origin, age, gender, sexual orientation, gender identity or expression, physical or mental disability, religion, ethnicity, language or ability to pay.
12. Be given a list of protective and advocacy services, when needed. These services help certain patients (e.g., children, elderly, disabled) exercise their rights and protect them from abuse and neglect.
13. Receive information about hospital and physician charges.
14. Ask for an estimate of hospital charges before care is provided.

Effective Communication and Participation in Your Care
15. Get information during your visit in a way you can understand. This includes communication assistance, such as sign language and foreign language interpreters, as well as vision, speech and hearing assistance provided free of charge.
16. Get information from your doctor/provider about:
   * your diagnosis
   * your test results
   * possible outcomes of care and unanticipated outcomes of care
   * Be involved in your plan of care and discharge plan or request a discharge plan evaluation at any time.
   * Involve your family in decisions about care.
   * Ask questions and get a timely response to your questions or requests.
   * Have your pain managed.
   * Refuse care.
   * Have someone with you for emotional support, unless that person interferes with your or others’ rights, safety or health.
   * Ask for a chaperone to be with you during exams, tests or procedures.
   * Choose your support person and visitors and change your mind about who may visit.
   * Select someone to make health care decisions for you if at some point you are unable to make those decisions (and have all patient rights apply to that person).

End of Life Decisions
17. Create or change an advance directive (also known as a living will or durable power of attorney for health care).
18. Have your organ donation wishes known and honored, if possible.

Informed Consent
19. Give permission (informed consent) before any non-emergency care is provided, including:
   * risks and benefits of your treatment
   * alternatives to that treatment
   * risks and benefits of those alternatives
20. Agree or refuse to be part of a research study without affecting your care.
21. Agree or refuse to allow pictures for purposes other than your care.

Privacy and Confidentiality
22. Have privacy and confidential treatment and communication about your care.
23. Be given a copy of the HIPAA Notice of Privacy Practices, which includes information on how to access your medical record.
To promote patient safety, we encourage you to speak openly with your health care team, be well informed, and take part in care decisions and treatment choices. Join us as active members of your health care team by reviewing the rights and responsibilities listed below for patients and patient representatives.

Complaints and Grievances

1. Complain and have your complaint reviewed without affecting your care. If you have a problem or complaint, you may talk to your doctor, nurse manager or a department manager.
2. You may also contact patient relations at 410-710-8200, ext. 8200 between the hours of 8:30 a.m. to 5 p.m., or email hghpatientrelations@jhmi.edu.
3. If your issue is not resolved to your satisfaction, other external groups you may contact include:
   - **Hospital’s Quality Improvement Organization (QIO) for coverage decisions or to appeal a premature discharge:** KEPRO
     Organization for Beneficiary Family Centered Care (BFCC-QIO)
     5201 West Kennedy Blvd., Suite 900
     Tampa, FL 33609
     1-844-455-8708
   - **State Agency:**
     Maryland Department of Health & Mental Hygiene
     Office of Health Care Quality, Hospital Complaint Unit
     7120 Samuel Morse Drive
     Second Floor
     Columbia, Maryland 21046
     Toll free: 1-877-402-8218
   - **Accreditation Agency:**
     The Joint Commission Office of Quality and Patient Safety
     One Renaissance Blvd.
     Oakbrook Terrace, IL 60181
     Fax: 630-792-7635
     Using the “Report a Patient Safety Event” link in the “Action Center” on the home page of the website: jointcommission.org
   - **To address discrimination concerns, you may also file a civil rights complaint with the U.S. Department of Health and Human Services:**
     Office for Civil Rights
     200 Independence Ave., SW
     Room 509F, HHH Building
     Washington, DC 20201
     1-800-537-7697 (TDD)
     OCRMail@hhs.gov
     Complaint forms are available at: hhs.gov/ocr/office/file/index.html

You have the responsibility to:

1. Provide accurate and complete information about your health, address, telephone number, date of birth, insurance carrier and employer.
2. Call if you cannot keep your appointment.
3. Be respectful of your hospital team, from the doctors, nurses and technicians to the people who deliver your meals and the cleaning crews.
4. Be considerate in language and conduct of other people and property, including being mindful of noise levels, privacy and number of visitors.
5. Be in control of your behavior if feeling angry.
6. Give us a copy of your advance directive.
7. Ask questions if there is anything you do not understand.
10. Take responsibility for the consequences of refusing care or not following instructions.
11. Leave valuables at home.
12. Keep all information about hospital staff or other patients private.
13. Do not take pictures, videos or recordings without permission from hospital staff.
14. Pay your bills or work with us to find funding to meet your financial obligations.
# Your Care Team

<table>
<thead>
<tr>
<th>Team Member</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Nurse</td>
<td>RNs assume primary responsibility for the care of patients and direct the care provided by other members of the nursing team.</td>
</tr>
<tr>
<td>Licensed Practical Nurse</td>
<td>LPNs assist with the coordination and implementation of the plan of care as delegated by the RN, are licensed to administer specified medications, and take vital signs and perform many patient care procedures.</td>
</tr>
<tr>
<td>Patient Care Technician</td>
<td>PCTs assist with the care of patients as delegated by the RN by taking vital signs, collecting blood samples for testing and inserting urinary catheters.</td>
</tr>
<tr>
<td>Physician Assistant</td>
<td>PAAs receive extensive training and are certified and licensed to practice medicine under the supervision of a doctor, working in hospital and outpatient settings. They perform physical exams and order laboratory and radiology tests that result in a diagnosis and treatment plan for a medical problem or illness. They also prescribe medications.</td>
</tr>
<tr>
<td>Nurse Practitioner</td>
<td>NPs are RNs prepared through additional education and advanced clinical training, certified and licensed to provide comprehensive care for a variety of health problems. They prescribe medications and provide teaching and counseling to promote healthy behaviors.</td>
</tr>
<tr>
<td>Nurse Anesthetist Certified</td>
<td>CRNAs are qualified, as a result of additional training, certification and licensure, to administer anesthesia and manage patients during surgical procedures. CRNAs practice under the supervision of an anesthesiologist.</td>
</tr>
<tr>
<td>Nurse-Midwife</td>
<td>CNMs have advanced education, certification and licensure to manage comprehensive women’s health care in a variety of settings, focusing particularly on pregnancy, childbirth, the postpartum period, infant care, and the family planning and gynecological needs of women through their life cycle.</td>
</tr>
<tr>
<td>Attending Physician</td>
<td>Attending physicians are generally doctors who are responsible for and supervise the overall care plan of patients in the hospital. They may be a hospitalist, intensivist, primary care physician or surgeon, among other specialties.</td>
</tr>
<tr>
<td>Consulting Physician</td>
<td>Consulting physicians may be asked by attending physicians to assist with determining treatment recommendations. Consulting physicians are specialists in disciplines such as cardiology, nephrology, infectious diseases, pain management as well other areas, and add their expertise to aspects of patient care in conjunction with the attending physician. They may perform exams, and request and perform diagnostic tests to present recommendations for attending physicians to consider when making decisions on treatment options.</td>
</tr>
<tr>
<td>Hospitalists</td>
<td>Hospitalists are providers who specialize in the practice of hospital medicine, with the goal of providing comprehensive medical care to diagnose and manage patients’ acute illnesses while they are hospitalized. They provide hospital care information to patients’ primary care physicians when patients are discharged.</td>
</tr>
<tr>
<td>Intensivist</td>
<td>Doctors trained in internal medicine, with a sub-specialty in pulmonary and/or critical care, intensivists treat patients in the Special Care and Intensive Care Units.</td>
</tr>
<tr>
<td>Surgical Assistant, Registered Nurse, First Assistant</td>
<td>Certified personnel who assist surgeons during a variety of surgical procedures, including orthopaedic, vascular and general surgery.</td>
</tr>
</tbody>
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# Your Care Team

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<tr>
<td>Respiratory Care Practitioner</td>
<td>Specialized, certified practitioner who works under the supervision of an intensive care physician or pulmonologist. Specialized in both cardiac and pulmonary care, they educate and treat those suffering from heart and lung problems. They collaborate with specialists for the clinical care of patients, including airway management, administering aerosolized medications and managing life support.</td>
</tr>
<tr>
<td>Imaging Technologists</td>
<td>Imaging technologists perform diagnostic imaging exams and are responsible for accurately positioning patients and ensuring a quality medical image is produced. They work with radiologists, the doctors who interpret diagnostic imaging, to diagnose or rule out disease or injury. They include radiologic technologists, who perform exams that use ionizing radiation; sonographers, who perform ultrasound exams; MRI technologists; and nuclear medicine technologists, who perform exams that use radiopharmaceuticals.</td>
</tr>
<tr>
<td>Case Managers and Social Workers</td>
<td>Licensed medical social workers and registered nurse case managers work with doctors to provide clinical assessment and counseling, as well as promote communication among patients, their families and the interdisciplinary team. They plan for continuing needs as patients prepare for discharge from the acute care hospital and help make arrangements with other medical facilities, care providers and vendors. They also help arrange for home nursing care or home health care equipment or supplies if needed.</td>
</tr>
<tr>
<td>Community Health Nurse (COMMUNITY CARE TEAM MEMBER)</td>
<td>CHNs make home visits to improve the health of Howard County residents with multiple complex conditions. These RNs support patients' physical health, including assessing their health during the first home visit, organizing medications and helping resolve issues and concerns, providing information to providers and monitoring their progress toward goals of care.</td>
</tr>
<tr>
<td>Community Health Worker (COMMUNITY CARE TEAM MEMBER)</td>
<td>CHWs support a patient’s lifestyle and community service needs, including teaching them about chronic conditions, improving their self-management skills, connecting them with community resources and arranging for services like transportation, food and housing assistance.</td>
</tr>
<tr>
<td>Community Social Worker (COMMUNITY CARE TEAM MEMBER)</td>
<td>CSWs support patient’s mental and behavioral health including strengthening their coping skills, discussing transitions of living and aging, and connecting them with counseling, psychiatric and support services.</td>
</tr>
<tr>
<td>Advanced Care Planning Coordinator</td>
<td>ACP coordinators meet with patients and families to provide education, information and documents regarding advance directives. An advance directive is a legal document that communicates your health care wishes, if you are unable to communicate them for yourself, through appointing a health care agent and creating a living will. A health care agent is someone you assign to make decisions regarding medical treatment for you if you cannot speak for yourself. We are available to assist in the planning and completion of advance directives, by providing patients the opportunity to express their health care wishes in the form of a living will and through naming a health care agent.</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>PTs evaluate patients’ overall strength, balance and movement to help improve or return them to their highest functional level safely and with minimal to no pain.</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>OTs assist patients having difficulty with Activities of Daily Living, such as bathing, dressing and writing. They evaluate and treat patients with cognitive changes, and decreased strength and arm function.</td>
</tr>
<tr>
<td>Speech-Language Pathologist</td>
<td>SLPs evaluate and treat patients in the areas of swallowing and communication. These include eating and drinking safely, as well as speaking, understanding, reading and writing for communication.</td>
</tr>
</tbody>
</table>

*These health professionals work throughout the hospital and have extensive medical training. They are licensed and certified by the state of Maryland and may be intimately involved in your health care.*
Specialists Glossary

Addiction Medicine Physicians
Offer treatment prevention, screening and intervention for patients with addictions. These specialists can treat and recognize both psychological and physical addiction.

Allergists and Immunologists
Diagnose, treat and manage allergies, asthma and disorders that involve your immune system.

Anesthesiologists
Manage a surgical patient’s airway, support critical functions and provide post-operative pain control. Some also practice outside the hospital, specializing in pain management, administering a range of injections and medications to help patients manage chronic or acute pain due to an injury, disease or disorder.

Cardiologists
Diagnose and treat diseases of the heart and blood vessels. Certain cardiologists can perform interventional procedures, such as emergency angioplasty (to open blocked vessels) or pacemaker insertion.

Colon and Rectal Surgeons
Perform routine screenings, and medically and surgically treat diseases of the colon, rectum and anus, such as hemorrhoids, and colon and rectal cancers.

Diabetes Education Coordinators
Registered nurses who are responsible for coordinating the care of patients with diabetes, including developing therapeutic programs, educating patients and family members, evaluating care and planning for patient discharges.

Dentists
Study, diagnose, prevent and treat diseases, disorders and conditions of the mouth, jaw and related areas.

Dermatologists
Diagnose and treat conditions related to skin, hair and nails, including skin cancers such as melanoma, basal cell and squamous carcinoma.

Emergency Medicine Physicians
Care for patients with illnesses or injuries who require immediate medical attention, typically in the Emergency Department at the hospital.

Endocrinologists
Diagnose and treat conditions related to hormone imbalances in the body. They also help manage diseases like diabetes and thyroid disease.

Family Medicine Physicians
Provide ongoing, comprehensive health care for patients of all ages and genders, treating a wide range of diseases that affect all parts of the body. They also emphasize disease prevention and screening. Along with internal medicine physicians, they are considered “adult primary care physicians.”

Gastroenterologists
Diagnose and treat diseases and conditions of the digestive tract, including the esophagus, stomach, small and large intestines (colon), as well as the liver, gallbladder and pancreas.

General Surgeons
Perform a variety of procedures to treat conditions like hernias, gallbladder disease, appendicitis and cancer. Some surgeons have additional training in surgical oncology or surgery to treat cancer.

Geriatriicians
Focus on preventing and treating diseases and disabilities in older adults (generally ages 65+) or younger adults with complex medical conditions.
Gynecologists
Provide care for non-pregnant women, including performing gynecologic surgeries like hysterectomy. A gynecologic oncologist specializes in the diagnosis and treatment of cancer of the reproductive organs.

Hematologists
Study the diagnosis, treatment and prevention of diseases related to blood.

Hospitalists
Physicians who specialize in providing round-the-clock care for patients in the hospital. They work closely with the patient’s community-based primary care physician and other specialists.

Infectious Disease Specialists
Diagnose and treat infectious diseases, such as Lyme disease, hepatitis and other complex conditions. They regularly provide insight and advise on the use and potential effects of antibiotics.

Intensivists
Critical care physicians who diagnose and manage life-threatening conditions requiring organ support and invasive monitoring.

Infertility Specialists
Diagnose and treat individuals who are unable to conceive a baby, as well as women who are unable to carry a pregnancy to full term. Certain urologists can also treat male infertility.

Internal Medicine Physicians
Prevent, diagnose, treat and manage adult diseases as well as encourage disease prevention, screening and promote well-being. Along with family practice physicians and geriatricians, they are considered “adult primary care physicians.”

(Certified Nurse) Midwives
Trained in nursing with graduate training in OB/GYN to aid women in childbirth and can provide women with routine gynecologic care, obstetrical care, family planning and menopause management.

Nephrologists
Diagnose and treat kidney diseases, and care for those requiring renal replacement therapy such as dialysis, as well as kidney transplant.

Neurological Surgeons
Specialize in the diagnosis and surgical treatment of disorders affecting the nervous system including the brain, spinal cord and nerves. Only neck and spine surgery is performed at HCGH.

Neurologists
Diagnose and treat nervous system disorders—those that impact the brain, spinal cord and nerves, such as stroke, migraine headaches and seizures. They also treat sleep disorders in some cases. They do not perform surgery; patients requiring surgery can be referred to a neurosurgeon.

Obstetricians
Care for pregnant women—before, during and after labor. A maternal fetal medicine physician (also known as a perinatologist) is an obstetrician specially trained to treat high-risk pregnant women.

Oncologists
Manage cancer care from diagnosis through treatment and remission, using chemotherapy.

Ophthalmologists
Trained in eye and vision care to provide vision exams, prescriptions for glasses, treatment for eye disease or infection and outpatient eye surgery. Some perform cataract surgery, corneal transplant and other common eye procedures.

Oral and Maxillofacial Surgeons
Treat many diseases, injuries and defects in the head, neck, face, jaw and mouth.
Orthopaedic Surgeons
Diagnose and treat disorders of and injuries to the bones, joints, ligaments, tendons, muscles and nerves. They can manage pain and offer treatments beyond surgery. Many perform surgery of all kinds including minimally invasive procedures and joint replacement surgeries.

Otolaryngologists
Specialize in diagnosing and treating, medically or surgically, disorders of the head and neck, most frequently those that impact the ears, nose and throat, as well as thyroid disease.

Pain Management Specialists
Evaluate and treat pain, administering a range of injections, pain blocks and medications to help patients manage chronic or acute pain due to an injury, disease or disorder. Back pain is a common reason patients seek pain management specialists.

Pathologists
Examine tissue samples and body fluid to assist your physician in making a diagnosis.

Pediatricians
Manage the physical, mental and emotional well-being of infants and children under the age of 18.

Pediatrician Specialists
Care for infants and children under age 18, and receive additional medical training to provide specialized treatment of diseases, disorders and conditions affecting infants and children.

Physiatrists
Aim to enhance and restore optimal function and quality of life to people with injuries to or disabilities of the muscles, bones, tissues and nervous system.

Plastic Surgeons
Reconstruct facial and body defects due to birth disorders, trauma, burns and diseases like cancer, and treat non-healing wounds. They also perform cosmetic surgery, utilizing surgical and medical techniques to enhance appearance.

Podiatrists
Diagnose and treat many conditions impacting the foot, ankle, toes and lower leg. They use both medical and surgical approaches, including removing bunions.

Psychiatrists
Diagnose and treat mental disorders by counseling patients, prescribing medication, ordering lab tests and neuroimaging, and conducting physical examinations.

Pulmonologists
Diagnose and treat diseases and conditions involving the lungs, respiratory tract and chest. Many pulmonologists treat conditions such as sleep disorders, chronic obstructive pulmonary disorder and asthma. Some sub-specialize in critical care. Critical care physicians diagnose and manage life-threatening conditions requiring organ support and invasive monitoring. Such care is generally rendered in a hospital intensive care unit.

Radiologists
Specialize in diagnosing and treating diseases and injuries using medical imaging techniques such as X-ray, CT scan, ultrasound, mammography and MRI, as well as interpreting the medical images.

Rheumatologists
Diagnose and treat patients with inflammatory autoimmune diseases like arthritis or lupus that can affect the skin, joints, muscles, bones and organs.

Thoracic Surgeons
Operate on the heart, lungs, esophagus and other organs in the chest, treating both cancerous and benign conditions.
Urologists
Diagnose, treat and manage male and female patients with disorders or diseases that impact the kidneys, ureters, urinary bladder and urethra. They also diagnose and treat conditions of the male reproductive organs.

Vascular Surgeons
Specialize in the medical and surgical management of diseases affecting arteries and veins through medical therapy, minimally-invasive catheter procedures and surgical reconstruction.

Notes
# Medication Tracker

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<th>Drug</th>
<th>Dosage (how often)</th>
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As a service to our patients and community, we provide a blank medication tracker you can fill out electronically and store on your computer or print. Update as needed. [hcgh.org/medtracker](http://hcgh.org/medtracker)
Health Seminars
hopkinsmedicine.org/healthseminars

Health Videos
hcgh.org/videos

Wellness Seminars
hcgh.org/events

Be active in your care:

Speak up if you have questions or concerns.

Pay attention to the care you receive.

Ask a trusted loved one to be your advocate.

Know your medicine to prevent medication errors.

Participate in all decisions regarding your treatment plan.