MEDICAL DISCHARGE VOLUNTEER

Position Summary:

The Discharge Instructor provides a vital service to patients by affording them the opportunity to discuss concerns, ask questions, reinforce providers' orders, and receive further education. The Discharge Instructor is last person to see the patient and can save the staff nurse hours of follow up in the next week by assuring the completeness of the information given to the patient.

The Discharge Instructor reviews the MD/NP instructions with the patient, educates the patient on medications and how to take them, reviews the details for going to the hospital for lab tests, discusses future appointments, gives referrals for lab work and x-rays, and provides education about immunizations. S/he ensures completion of items in the discharge template in HeS.

<u>PLEASE NOTE:</u> Please use the *teachback method* that you learned in training. Studies have shown that 40-80 percent of the medical information patients receive is forgotten immediately and nearly half of the information retained is incorrect. The *teachback method* will help with patient knowledge and understanding. Also, remember that many of our patients cannot read in their own language, so your discharge conversation with them is immensely important.

Responsibilities and Tasks of the Discharge Instructor:

PART 1: GETTING STARTED

- Get chart from Exit rack at the front desk.
- Assure that the area where you are doing discharge provides **patient privacy**. You can use the blue shield or an exam room if one is available.

PART 2A: PATIENT EDUCATION

- Look up patient in HealtheState and open the **Discharge template**.
- Review the provider's note with the patient and reinforce provider's instructions.
- Using the teach back method, review the following with the patient:
 - ✓ Medications and any medication dosage changes
 - ✓ Detailed explanation of how to best take medication (*especially* antibiotics and asthma medications)
 - ✓ How and when to refill medications
 - ✓ Remind patient that each prescription is \$5.00

*NOTE: If the patient is prescribed an antibiotic, please check with Clinic Coordinator to see if we can fill the prescription tonight (same day as appointment).

- You may need to provide education or educational materials on disease processes like diabetes and diet.
 Contact the Clinic Coordinator for direction.
- Make a note on the coversheet if you feel that the patient needs **additional medication education**. We have a volunteer pharmacist who will meet with patients for further education.
- Review the white coversheet on the front of the chart. The primary nurse may have left some additional instructions or information in the "Discharge" section, such as the immunizations for which the patient is eligible. Please provide information about the vaccines and the dates they will be administered:
 - ✓ Write the date when the patient will come for the immunizations on the cover sheet.
 - ✓ Give the patient one of our vaccine booklets (in English and Spanish) as needed.
 - ✓ **Do not transcribe immunization history** if the patient says he/she has received that vaccine:
 - Ask the patient where s/he received the vaccine,
 - Tell them to bring a paper copy to the next appointment
 - Make a note on the cover sheet.

PART 2B: PATIENT REFERRALS & PAPERWORK:

PAPERWORK: Give the following to the patient:

- ✓ Paperwork for lab/xrays. **Indicate in the discharge note** that that lab/xray referrals were given by clinking on the link provided.
- ✓ Appointment cards for future dates
- ✓ Purple medication card for pick up.IF PATIENT IS PRESCRIBED AND ANTIBIOTIC PLEASE TALK WITH CLINIC COORDINATOR. ANTIBIOTICS CAN BE FIVEN
- ✓ If you feel the patient would benefit from a copy of his or her progress on BP, LDL, or A1c, you can print off the face sheet from the **Registry** tab and give it to patient.

The following lab tests need written instructions:

- Lipid blood test: Please give instructions on fasting. Bring to attention of nurse coordinator any order that goes against standing order. i.e. no lipid testing for patients on maximum doses of Lipitor or Crestor.
- Stool for occult blood: Give Hemocult envelope and instructions which are in the lab. Read instructions out loud as many patients cannot read.
- Stool for H Pylori: Give specimen container (plastic cup with yellow lid) and instructions which are in the lab. Put the patient's name on the container (not on the lid).

REFERRAL STEPS:

- ✓ Make sure the diagnosis is indicated on the referral forms. THIS IS CRUCIAL.
- ✓ Sign referral form, if necessary.
- ✓ Remind patient to **call the hospital** for an appointment if testing requires it.
 - Do not give referrals for ultrasounds, PET scans, MRIs, or other diagnostic tests. Simple x-rays are acceptable.
 - Mammograms are ordered in the GYN clinic <u>ONLY</u>. If a provider orders one, do not give the
 referral to the patient. Instead, ask the patient to call for a GYN appointment or talk with the
 Clinic Coordinator.
 - Some referrals are completed and written the next day by the primary nurse. This occurs when
 the patient is referred to a specialist or requires a special test (i.e., an ultrasound). The nurse will
 arrange the appointment and call or send referral to patient.

Check with the Clinic Coordinator if:

- o The patient says that the doctor said something that is not written in the visit note.
- You notice a medical issue (i.e. blood pressure) that was not addressed in the clinic appointment.

PART 3: THE DISCHARGE NOTE

After speaking with patient, **complete the discharge note in HealtheState.**

*The discharge note should include:

- ✓ A review of the provider's notes
- ✓ A narrative note about what you told the patient. Bullet points can be used.
- ✓ Vaccine information, if needed. Note dates of appointments if patient agrees to come.

CHECK THE BOXES: Make sure the following boxes are checked before the end of the discharge session:

- ✓ Check the **DISCHARGE INSTRUCTION** box
- Review checklist and check any relevant boxes, such as HIV, Heath Education, Immunizations, Procedure, or Meds.
- ✓ Check the Lab/Rad referrals link. Indicate *when* patient is to get the test.
- ✓ Check the **Interpreter Used box**, if applicable

appointments

appointments		
	NO - Make a note and attach it to	
YES	chart	
Cardiology	Counselor (mental health)	
Dermatology	ENT	
Diabetes Education	Glucometer Training	
Dietician/Nutritionist	Hemo/Oncologist	
Eligibility	Neurologist	
Endocrinology	Psychiatrist	
Gastroenterology	Surgeon	
Glucometer Training	Urologist	
Nephrologist	Gynecologist	
Orthopedist	EKG	
Podiatrist	Attached Referral	
Pulmonology	Optomet. / Ophtalm.	
Rheumatologist	Put on Waiting List	
	Physical Therapy	

lab orders / referrals		
STD tests	NO	Please clip a "DHS Resources" information page to chart and circle STD testing section
Surgery	NO	Add comment for Clinic Coordinator
Ultrasound	NO	Add comment for Clinic Coordinator
MRI	NO	Add comment for Clinic Coordinator
OB/Maternity NO Clinic	NO.	Please clip a "DHS Resources" information page to chart and circle Maternity Clinic
	NO	section
Occult Blood YES		Please get "Hemoccult Patient Screening Kit" envelope from lab and clip to chart
	YES	along with "Occult Blood" instructions from. A Lab referral to VHC must also be
		created and given to patient. OCCULT BLOOD TAB
Xray	YES	Except for GI and Barium Enema Xrays
H Pylori YE		This test requires a stool specimen. Please retrieve a specimen cup and yellow lid
	YES	from lab. The pt should also receive a page of instructions for how to collect the specimen. SEE 'HPYLORI' TAB.
Hepatitis Testing	YES	Can be drawn at AFC or create referral for draw at VHC
Urine (24 hr)	YES	Sample is not collected here! Patient will have to go to hospital with referral to pick up a special container.
Pregnancy Test SEE NOTE	CEE NOTE	No referral is necessary. Even if no lab technician is present, a test should be
	SEE NOTE	performed at the clinic. Please notify clinic coordinator.
Urinalysis DEPENDS	DEDENIDO	If a lab tech is present this should be done here. Otherwise, check with clinic
	DEFENDS	coordinator.
Barium Enema		Make note for Clinic Coordinator
Upper GI	NO	Iviake note for clinic coordinator