

Introduction Tube Feeding

■ Emergency Phone Numbers:

Emergency: 911

Other Numbers:

BROOKS HEALTH CARE, INC.

Merced – (209) 382-2273

Fresno – (559) 233-4663

Visalia – (559) 798-4663

Toll Free – (877) 889-3424

Name of Doctor: _____

Doctor Ph. # _____

Home Health Agency: _____

Ambulance: _____

Hospital/Emergency Room: _____

Tape business card here

Tape business card here

Tape business card here

Tape business card here

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Mission Statement:

The mission of BROOKS HEALTH CARE is to provide optimum patient centered pharmacy and respiratory services in the “alternate care” arena, while maintaining a supportive focus on our employees and community.

Welcome to *BROOKS HEALTH CARE, INC.* We are a locally owned office providing health care services in alternate settings.

Your doctor has prescribed _____

Giving your medicines in the outpatient setting or doing your own treatments at home allows you to continue your medical care without a stay in the hospital. BROOKS HEALTH CARE works closely with your doctor to develop a treatment plan that is right for you.

BROOKS HEALTH CARE, INC., offers an experienced staff including nurses and pharmacists who provide advise and support to you, your caregiver and health care team, check on your progress and report back to your doctor and/or home health agency, supply and deliver the products and equipment you will need, as well as provide emergency assistance. Our regular business hours are **8:30 am to 5:00 pm**. Monday through Friday. **We are available 24 hours a day, 7 days a week.**

Your training may begin in the hospital and will continue at the Ambulatory Infusion center and or home until you are able to safely complete each step of your therapy or treatment.

The procedures in these booklets have been carefully written for your education and safety. The nurses may go through the booklets and instruction guides with you until you understand each step. Family members or friends may also be present and trained as caregivers.

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■ Overview

The Need

Certain Medical conditions require lengthy or long-term therapies or treatments. These may be required even after hospitalization is no longer medically necessary.

The Solution

BROOKS HEALTH CARE, INC. offers an alternative to extended hospital care. With our support, you can recover in the outpatient setting or at home, with the comfort and security of family and familiar surroundings.

Staffed by clinical pharmacists and registered nurses experienced in I.V. Therapies and home care. BROOKS HEALTH CARE, INC. has earned the confidence and respect of both physicians and patients.

The Benefits

BROOKS HEALTH CARE, INC. believes that a well-managed home care pharmacy service and ambulatory infusion center provides a high quality, less costly alternative to in-hospital care.

BROOKS HEALTH CARE, INC. embraces the standards set by accreditation agencies, as well as State and Federal guidelines so you can be assured of high quality care.

Other benefits include the chance to reestablish family relations, the comfort and security of outpatient and home and the freedom to participate in normal activities.

Direct Billing

BROOKS HEALTH CARE, INC. bills all charges for services and supplies directly to your insurance carrier. We will also work with you on charges not covered by insurance.

Comprehensive Services

A team of specially trained RNs and pharmacists provide the professional services you need. We are open Monday thru Friday 8:30am to 5:00pm and available by telephone 24 hours a day, seven days a week.

Your nurse/therapist will teach you and your family members or caregiver the about the procedures, and treatment which will help you to assume responsibility for your own care. If necessary, they will be there until you or your caregiver can do the procedure unassisted.

BROOKS HEALTH CARE, INC. also provides a complete line of supplies and equipment for these treatments.

BROOKS HEALTH CARE, INC. makes a 24-hour-a-day commitment to our patients. We are available to provide you with compassionate, personalized care and to help you achieve the independence and enhanced quality of life that care at home can mean.

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By Physician's Order

- ❑ I.V. Medications – such as anti-infectives
- ❑ Pain Management
- ❑ I.V. Nutrition – for those without a functioning digestive system
- ❑ I. V. Fluids – for those unable to meet their fluid needs by oral intake
- ❑ I.V. Chemotherapy
- ❑ I.V.I.G. and Corticosteroids
- ❑ Other forms of specialized therapy or health care needs _____

■ **Patient Monitoring and Follow-up**

During your therapy, a nurse will perform routine procedures and assessments. Monitor your response to treatment, do dressing changes, obtain blood samples or perform other procedures if ordered by your doctor. Other BROOKS HEALTH CARE, INC. professionals will be monitoring your therapy / treatment as appropriate. Your doctor will be informed of your progress.

BROOKS HEALTH CARE, INC. also has regular conferences to discuss all aspects of your care including pharmacy, and nursing, billing and any input from you or your caregiver.

■ **Product Delivery**

Should you need supplies and equipment they will be delivered to your home as needed. All products should be checked for damage. Any problems should be reported to your nurse or pharmacist. Replacement supplies or equipment will be delivered to your home as soon as possible.

Store drugs, solutions and supplies as directed:

- ❑ Keep medications refrigerated if indicated
- ❑ Keep supplies in a clean dry area
- ❑ Keep sharps & sharps container out of children's reach

If at any time you have questions, please call:

Merced – (209) 382-2273 Fresno – (559) 233-4663 Visalia - (559) 798-4663

We look forward to serving you!

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CENTERS FOR MEDICARE & MEDICAID SERVICES

Quick Facts about Medicare's Coverage for Prescription Drugs

Medicare offers prescription drug plans to help you pay for the prescriptions you need. For most people, joining when you are first eligible means you will pay a lower monthly premium. Waiting to join may mean paying a penalty.

Even if you don't use a lot of prescription drugs now, you should still consider joining a Medicare drug plan to make sure you have coverage for your future needs.

What do I need to know?

- To get Medicare prescription drug coverage, you must choose and join a Medicare drug plan.
- You can join a Medicare drug plan between November 15–December 31 each year. Your coverage will begin January 1 of the following year.
- If you join, your costs will vary depending on which plan you choose. In general, you may pay a monthly premium and a yearly deductible (up to the first \$295). You will also pay a share of your prescription drug costs, and your plan pays a share. Medicare helps pay for drugs up to a limit (\$2,700 in total) and once your total out-of-pocket costs for drugs reach \$4,350, you pay 5% of the costs and Medicare pays 95% of the costs for the rest of the year. The amounts shown are for 2009.
- Many people with limited income and resources will get extra help paying for their Medicare prescription drug coverage. People with the lowest incomes and resources will get the most help.

What if I already have prescription drug coverage?

If you already have prescription drug coverage through your Medicare health plan or other insurance, check with your current plan to see how it works with, or is affected by, Medicare prescription drug coverage.

Unless you have other drug coverage that is, on average, at least as good as standard Medicare prescription drug coverage, it's important for you to join a Medicare drug plan when you are first eligible.

How can I get more information?

You can look at the "Medicare & You" handbook, visit www.medicare.gov, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. For more information on extra help with prescription drug costs and how to apply, call Social Security at 1-800-772-1213 or visit www.socialsecurity.gov. TTY users should call 1-800-325-0778

CMS Publication No. 11102 Revised September 2008

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CMS MEDICARE DMEPOS SUPPLIER STANDARDS

Note: This list is an abbreviated version of the application certification standards that every Medicare DMEPOS supplier must meet in order to obtain and retain their billing privileges. These standards, in their entirety, are listed in 42 C.F.R.424.57 (c).

1. A supplier must be in compliance with all applicable federal and state licensure and regulatory requirements.
2. A supplier must provide complete and accurate information on the DMEPOS supplier application. Any changes to this information must be reported to the National Supplier Clearinghouse within 30 days.
3. An authorized individual (one whose signature is binding) must sign the application for billing privileges.
4. A supplier must fill orders from its own inventory, or must contract with other companies for the purchase of items necessary to fill the order. A supplier may not contract with any entity that is currently excluded from the Medicare program, any state healthcare programs, or from other federal procurement or non-procurement programs.
5. A supplier must advise beneficiaries that they may rent or purchase inexpensive or routinely purchased durable medical equipment, and of the purchase option for capped rental equipment.
6. A supplier must notify beneficiaries of warranty coverage and honor all warranties under the applicable state law. And repair or replace free of charge Medicare-covered items that are under warranty.
7. A supplier must maintain a physical facility on an appropriate site/.
8. A supplier must permit CMS (formerly HCFA), or its agents to conduct on-site inspections to ascertain the supplier's compliance with these standards. The supplier location must be accessible to beneficiaries during reasonable business hours, and must maintain a visible sign and posted hours of operation.
9. A supplier must maintain a primary business telephone listed under the name of the business in a local directory or a toll free number available through directory assistance. The exclusive use of an answering machine or cell phone is prohibited.
10. A supplier must have comprehensive liability insurance in the amount of at least \$300,000 that covers both the supplier's place of business and employees of the supplier. If the supplier manufactures its own items, this insurance must also cover product liability and completed operations.
11. A supplier must agree not to initiate telephone contact with beneficiaries, with few exceptions allowed. This standard prohibits suppliers from calling beneficiaries in order to solicit new business.
12. A supplier is responsible for delivery and must instruct beneficiaries on use of Medicare covered items, and maintain proof of delivery.
13. A supplier must answer questions and respond to complaints of beneficiaries, and maintain documentation of such contacts.
14. A supplier must maintain and replace at no charge or repair directly, or through a service contract with another company, Medicare covered items it has rented to beneficiaries.
15. A supplier must accept returns of substandard (less than full quality for the particular item) or unsuitable items (inappropriate for the beneficiary at the time it was fitted and rented or sold) from beneficiaries.
16. A supplier must disclose these supplier standards to each beneficiary whom it supplies a Medicare-covered item.
17. A supplier must disclose to the government any person having ownership, financial, or control interest in the supplier.
18. A supplier must not convey or reassign a supplier number, i.e., the supplier may not sell or allow another entity to use its Medicare billing number.
19. A supplier must have a complaint resolution protocol established to address beneficiary complaints that relate to these standards. A record of these complaints must be maintained at the physical facility.
20. Complaint records must include: the name, address, telephone number and health insurance claim number of the beneficiary, a summary of the complaint, and any actions taken to resolve it.
21. A supplier must agree to furnish CMS (formerly HCFA) any information required by the Medicare statute and implementing regulations.
22. All suppliers must be accredited by a CMS-approved accreditation organization in order to receive and retain a supplier billing number. The accreditation must indicate the specific products and services, for which the supplier is accredited in order for the supplier to receive payment of those specific products and services, for which the supplier is accredited in order for the supplier to receive payment of those specific products and services (except for certain exempt pharmaceuticals). *Implementation Date – October 1, 2009.*
23. All suppliers must notify their accreditation organization when a new DMEPOS location is opened.
24. All supplier locations, whether owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare.
25. All suppliers must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation.
26. Must meet the surety bond requirements specified in 42 C.F.R.424.57 (c). *Implementation date – May 4, 2009.*

Palmetto GBA
National Supplier Clearinghouse
P.O. Box 10042 Columbia, South Carolina 29202-3142 (866) 238-9652
A CMA Contracted Intermediate Carrier

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■ Patient's Bill of Rights and Responsibilities

As a BROOKS HEALTH CARE, INC. patient, family members or patient's authorized representative, you have the right to:

1. Be informed of the service offered by BROOKS HEALTH CARE, INC., including those services provided in Ambulatory Infusion Center or your home.
 - *NOTE: BROOKS HEALTH CARE pharmacists and drivers are not trained in CPR and will not provide CPR in the event of an emergency.*
 - *The AIC nurses are trained in CPR and will initiate only basic life support and call 911 unless otherwise stated in a DNR/Advanced Directive on file in your record.*
2. Be fully informed of all of your rights and responsibilities for receiving services in the alternative care setting.
3. Receive a timely response from BROOKS HEALTH CARE, INC. regarding your request for services in the alternative setting.
4. Be given information on BROOKS HEALTH CARE, INC. policies and procedures and charges for services, including your coverage or non-coverage of services, prior to receiving care.
5. Request and receive an itemization of charges for services rendered, regardless of the source of that payment.
6. Be advised of any changes in charges within 30 calendar days.
7. Choose your alternative care setting provider and be able to communicate with that provider.
8. Properly trained personnel to perform assigned tasks.
9. Request proof of the education/training qualifications of the staff providing your care.
10. Be given appropriate and professional quality health care services without discrimination against your race, creed, color, religion, sex, national origin, sexual preference, disability, age, diagnosis or disease state.
11. Be advised in advance of the frequency and discipline of services, and any changes to the plan of care or frequency.
12. Have your communication needs met,
13. Receive information about Advance Medical Directives and be informed about BROOKS HEALTH CARE, INC. policies on Advance Directives
14. To formulate Advance Directives and to receive care that is not based on whether or not you have executed such a Directive.
15. To use the State's Pharmacy hotline to lodge complaints or to raise questions concerning the implementation of the Advance Directives requirement.
16. Be treated with courtesy and respect, personally and for your property and belongings, by all who provide health care services to you in the alternative care setting.

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17. Be free from emotional, psychological, sexual, physical or mental abuse, neglect and or exploitation by your care provider.
18. Be informed of the nature and purpose of care and be given proper identification by name and title of everyone who provides you with health care services.
19. To make informed decisions regarding care or services.
20. Be given complete and current information about your diagnosis, treatment, alternatives, risks and expected outcomes or barriers to treatment and required by your physician's legal duty to disclose, in terms and language you can reasonably be expected to understand.
21. A plan of care that will be developed to meet your unique health needs.
22. Participate in the development of your plan of care and receive appropriate instruction and education regarding the plan
23. Be given an assessment and update of your developed plan of care.
24. Be given coordinated care.
25. Be free from chemical and physical restraints except as authorized in writing by a physician.
26. Participate in discussions on ethical issues concerning your care, and be involved in decisions to withhold resuscitation, and forgo or withdraw life-sustaining care.
27. Be informed of the name of the person supervising the care and how to contact that person.
28. Privacy and confidentiality of all records, communications and personal information.
29. Review all of your health records upon request unless otherwise indicated by physician or state law. If allowed by state law, you have the right to copy your records upon request and at a reasonable cost.
30. Be admitted for service only if BROOKS HEALTH CARE, INC. has the ability to provide safe, appropriate and professional care at the level of intensity needed relating to physical orders.
31. Be informed within a reasonable time of anticipated termination of service or plans for transfer to another agency.
32. Voice complaints with and/or suggest change in health care services and/or staff without being threatened, restrained or discriminated against. Any complaints may be addressed to Kelly Brooks, Pharm. D. Phone: (559) 233-4663 with the expectation that the information will be handled confidentially or you may voice any complaint to: the Pharmacy Board, California State Board of Pharmacy, 400 "R" St., Sacramento, CA. 95814: Medicare Hotline: (800) 899-7095: ACHC (Accreditation for Healthcare) 919-785-1214
33. Outcome and follow-up action by BROOKS HEALTH CARE, INC. communicated verbally to patient/caregiver within 24 hours from initial complaint.
34. Refuse all or part of your care and to be informed of the expected outcome of such action.
35. Be referred elsewhere if you are denied services solely on your inability to pay.

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36. Receive a written explanation of denied service for any reason and to be given information regarding community resources upon request.
37. Access a directory of other licensed agencies or providers of service.
38. Be informed of any care provided by BROOKS HEALTH CARE, INC. that has experimental or research aspects with documentation of voluntary informed consent.

The patient's family or guardian may exercise the patient's rights when the patient has been judged incompetent.

As a BROOKS HEALTH CARE, INC. patient, you have the responsibility to:

1. Give accurate and complete health information concerning your past illnesses, hospitalization(s), medications, allergies and other pertinent items.
2. Provide a safe environment for the provision of care.
3. Inform BROOKS HEALTH CARE, INC. when you will not be able to keep a scheduled health care visit.
4. Participate in the development and update of your plan of care.
5. Adhere to your develop care (e.g., missed dose of medication should be reported to nurse/pharmacist.
6. Request further information concerning anything you do not understand.
7. Give information regarding concerns or problems to a BROOKS HEALTH CARE, INC. staff member.
8. Agree to notify BROOKS HEALTH CARE, INC. of any hospitalization or change in customer insurance, address, telephone number, physician or when the need for rental equipment is no longer needed.

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BROOKS HEALTH CARE, INC. Notice of Privacy Practices Effective: April 14, 2003

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

BROOKS HEALTH CARE, INC. uses health information about you for treatment, to obtain payment for treatment, for administrative purposes, and to evaluate the quality of care that you receive. Your health information is contained in a medical record that is the physical property of BROOKS HEALTH CARE, INC.

How BROOKS HEALTH CARE, INC. May Use or Disclose Your Health Information

For Treatment. BROOKS HEALTH CARE, INC. may use your health information to provide you with medical treatment for services. For example, information obtained by a health care provider, such as a physician, nurse, or other person providing health services to you, will record information in your record that is related to your treatment. This information is necessary for health providers to determine what treatment you should receive. Health care providers will also record actions taken by them in the course of your treatment and note how you respond to the actions.

For Payment. BROOKS HEALTH CARE, INC. may use and disclose your health information to others for purposes of receiving payment for treatment and services that you receive. For example, a bill may be sent to you or a third-party payor, such as an insurance company or health plan. The information on the bill may contain information that identifies you, your diagnosis, and treatment or supplies used in the course of treatment.

For Health Care Operations. BROOKS HEALTH CARE, INC. may use and disclose health information about you for operational purposes. For example, your health information may be disclosed to members of the medical staff, risk or quality improvement personnel, and others to:

- Evaluate the performance of our staff;
- Assess the quality of care and outcomes in your cases and similar cases;
- Learn how to improve our facilities and services; and
- Determine how to continually improve the quality and effectiveness of the health care we provide.

Appointments. BROOKS HEALTH CARE, INC. may use your information to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to the individual.

Fund Raising. BROOKS HEALTH CARE, INC. may use your information to contact you to raise funds for BROOKS HEALTH CARE, INC.; or a group health plan, health insurance issuer, or HMO with respect to a group health plan may disclose health information to the sponsor of the plan.

Required by Law. BROOKS HEALTH CARE, INC. may use and disclose information about you as required by law. For example, BROOKS HEALTH CARE, INC. may disclose information for the following purposes:

- For judicial and administrative proceedings pursuant to legal authority;
- To report information related to victims of abuse, neglect or domestic violence; and
- To assist law enforcement officials in their law enforcement duties.

Public Health. Your health information may be used or disclosed for public health activities such as assisting public health authorities or other legal authorities to prevent or control disease, injury, or disability, or for other health oversight activities.

Decedents. Health information may be disclosed to funeral directors or coroners to enable them to carry out their lawful duties.

Organ/Tissue Donation. Your health information may be used or disclosed for cadaveric organ, eye or tissue donation purposes.

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Research. BROOKS HEALTH CARE, INC. may use your health information for research purposes when an institutional review board or privacy board that has reviewed the research proposal and established protocols to ensure the privacy of your health information has approved the research.

Health and Safety. Your health information may be disclosed to avert a serious threat to the health or safety of you or any other person pursuant to applicable law.

Government Functions. Specialized government functions such as protection of public officials or reporting to various branches of the armed services that may require use or disclosure of your health information.

Workers compensation. Your health information may be used or disclosed in order to comply with laws and regulations related to Workers compensation.

You're Health Information Rights

You have the right to:

- Request a restriction on certain uses and disclosures of your information as provided by 45 CFR§ 164.522; however, BROOKS HEALTH CARE, INC. is not required to agree to a requested restriction;
- Obtain a paper copy of the notice of information practices upon request;
- Inspect and obtain a copy of your health record as provided for in 45 CFR § 164.524;
- Amend your health record as provided in 45 CFR § 164.526
- Request communications of your health information by alternative means or at alternative locations;
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken; and
- Receive an accounting of disclosures made of your health information as provided by 45 CFR § 164.528.

Complaints

You may complain to BROOKS HEALTH CARE, INC. and to the Department of Health and Human Services if you believe your privacy rights have been violated. You will not be retaliated against for filing a complaint.

Obligations of BROOKS HEALTH CARE, INC.; BROOKS HEALTH CARE, INC. is required to:

- Maintain the privacy of protected health information;
- Provide you with this notice of its legal duties and privacy practices with respect to your health information;
- Abide by the terms of this notice;
- Notify you if we are unable to agree to a requested restriction on how your information is used or disclosed;
- Accommodate reasonable requests you may make to communicate health information by alternative means or at alternative locations; and
- Obtain your written authorization to use or disclose your health information for reasons other than those listed above and permitted under law.

BROOKS HEALTH CARE, INC. reserves the right to change its information practices and to make the new provisions effective for all protected health information it maintains. Revised notices will be made available to you in the manner prescribed in Policy and Procedure Notice of Privacy Practices.

Contact Information

If you have any questions or complaints, please contact:

BROOKS HEALTH CARE, INC. PRIVACY OFFICER

Susan Brock-Jones, C.O.O.

Mailing Address

PO BOX 9309

Fresno, CA. 93791

Local: (559) 233-4663

Physical Address

3410 W. Ashlan Ave

Fresno, CA. 93722

Toll Free: (877) 889-3424

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■ Advanced Medical Directives

Your Rights

You have the right to make your own medical treatment decisions. The Patient Self-Determination Act makes sure we tell you about these rights.

Your doctor will give you information that will help you decide about treatment. Your doctor may also tell you what you should do. But you have the right to:

Say "yes" to the treatment you want which may help you.

Say "no" to any treatment you do not want, even if it might keep you alive longer.

Your doctor can tell you what treatments may help you. Sometimes there is more than one treatment that might help. People have different ideas about which is best.

Many treatments have side effects. Your doctor must tell you about serious problems your medical treatment may cause. Your doctor can also tell you how treatment can help you. But your doctor cannot tell you which treatment you want or whether you want any treatment. That depends on you and your values.

People who are sick may not feel like talking about these things. Sometimes people are so sick or hurt that they can't talk or decide what they want. You may be able to fill out a form which names a person you trust to make medical decisions for you when you can't make them for yourself. This is called an Advanced Medical Directive.

Durable Power of Attorney

Any adult can fill out this form. Fill out this form if you want to make sure that someone you trust will be able to speak for you when you're too sick or hurt to make your own decisions.

Write down on the Durable Power of Attorneys form what you would or would not want for medical treatment. This depends on your values and what is important to you; things like how important it is for you to be independent or free of pain or to live as long as possible or to be able to talk with your family and friends. Advance Directives can also limit life-prolonging measures whether there is little or no chance for recovery. You should also talk to your doctor about what you want. That way you can be sure ahead of time that everyone understands each other.

If you are too sick or hurt to make medical treatment decisions, your family members or close friends may decide with your doctors and nurses what is best for you. But sometimes treatment decisions are hard to make and it truly helps your family, friends and your doctor if they know what you want. You can make your wishes known by writing them on this form.

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Living Wills

If you do not have anyone to make medical treatment decisions for you, let your doctor know what you want in a Living Will.

In a Living Will, you can write down the treatments you would and would not want, and when you would or would not want them. Your doctor could use the information to help make medical treatment decisions for you. There are special forms for a Living Will. You just write down the way you want to be treated.

Resources

You can get more information about Advance Medical Directives from BROOKS HEALTH CARE, INC. your doctor or nurse. Forms can sometimes be obtained from:

BROOKS HEALTH CARE, INC.

- Your Attorney
- The State Department of Health
- Choice in Dying
250 West 57th Street
New York, NY 10107
- The California Medical Association (www.cmanet.org)
- Stationery Stores
- Online resources (www.findlegalforms.com)

You need to sign and date your Advance Directive and have it witnessed and notarized in some cases. Keep a card in your wallet to purse stating you have an Advance Directive and where to find it. Give a copy of your Advance Directive to your doctor and any other health care providers. Discuss your Advance Directives with your family and friends. Give copies to relatives or friends who are likely to be called in an emergency. Review your Advance Directives regularly and make changes as needed. Tell your doctor, family and friends of any changes.

This discussion on Advance Directives is not to be construed as legal advice. You should contact an attorney to explain the law and your rights and to obtain help in completing the forms that are needed to take advantage of these rights.

We at BROOKS HEALTH CARE, INC. want our patients to understand their rights to make medical treatment decisions. BROOKS HEALTH CARE, INC. has formal policies to ensure your wishes about treatment are followed. If you have any questions, talk with your doctor, nurse or pharmacist

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■ Principles of Asepsis

Asepsis means sterile procedure. This is a practice that keeps objects and areas free of germs. Germs are small and found everywhere. Some germs cause disease. One of the best means by which germs can be controlled is through the use of sterile procedures.

A sterile field is an area from which you work. The sterility depends on keeping as many germs as possible away from the area. It is important to keep the area as clean as possible while doing your catheter or site care, while preparing and infusing your medicine or preparing items needed for special treatments. Keep all pets outside during this time to avoid contamination of your supplies and your hands. Do not have sick people around you.

Choose a clean area for storing your medical supplies. A clean space in your refrigerator may be needed to store medicine or fluids.

The principles by which we maintain asepsis are:

1. Always wash your hands before and after any procedure.
2. A sterile object is contaminated when it touches an unsterile object.
3. Always face a sterile field. Do not turn your back or side to a sterile field.
4. Hold sterile objects above your waste or above the table. This will help you to keep the object in sight.
5. Do not speak, cough, sneeze or laugh over a sterile field. If necessary to do any of these, turn your head away from the area.
6. Never reach across a sterile field.
7. Do not allow liquids to splash when preparing your medicine or solution.
8. Keep sterile packages from becoming wet, broken or punctured.

Hand Washing

Hand washing with soap and running water removes dirt and germs. Dirty hands are the most common way to spread infection. **Because of this, handwashing is the single most important measure for preventing the spread of infection.** Good handwashing is part of aseptic technique.

Always wash your hands before beginning and after completing any procedure, following the procedure below:

1. Remove all rings as these hold dirt and germs. Wear your watch well above your wrist.
2. Turn on the water to a lukewarm temperature. Leave the water running.
3. **Put hands and wrists under running water, keeping fingertips pointing down. Be careful not to touch bottoms or sides of the sink or faucets.**
4. Once your hands are wet, apply soap. With hands pointing down, begin to scrub. Start with fingers, paying special attention to the area under the nails. Work up to your wrists.

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5. Wash well for at least 15 seconds.
6. Rinse hands and wrists under running water. Keep your hands down to prevent dirt and soap from running back up your forearms.
7. Dry hands using a paper towel.
8. Turn off the faucets with a paper towel.

■ Home Care Safety

Here are some guidelines to help you keep a careful eye on your home and maintain safe habits.

The safe way is always the right way to do each job. Shortcuts may hurt.

Correct unsafe conditions before they cause an accident.

Take responsibility. Keep your home safe.

Know your emergency service number. This number and a Survival Guide may be listed in your telephone book. Your emergency service number is **911**.

Medicines

If children are in the home, store medicines and poisons in child-proof containers and out of reach.

All medicines should be labeled clearly and left in original containers.

Do not give or take medicines that were prescribed for other people.

When taking or giving medicines, read the label and measure doses carefully. Know the side effects of the medicines you are taking.

Throw away outdated medicines by pouring down a sink or flushing down the toilet.

A Fall

Falls are the most common and often the most serious accident in the home. Here are some things you can do to prevent falls in your home.

Arrange furniture to avoid an obstacle course.

Install handrails on all stairs, showers and bathtubs and toilets.

Keep stairs clear and lighted.

Place rubber mats or grids in showers and bath tubs.

Use bath benches or shower chairs if you have muscle weakness, shortness of breath or dizziness.

Wipe up all spilled water, oil or grease immediately.

Pick up and keep surprises out from under foot, including electrical cords and throw rugs.

Keep drawers and cabinets closed.

Install good lighting to avoid groping in the dark.

Place pump/pole on stable surfaces.

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Lifting

If it is too big, too heavy or too awkward to move alone—GET HELP. Here are some things you can do to prevent low back pain or injury.

Stand close to the load with your feet apart for good balance.

Bend your knees and “straddle” the load.

Keep your back as straight as possible while you lift and carry the load.

Avoid twisting your body when carrying a load.

Plan ahead – clear your way.

Electrical Accidents

Watch for early trouble signs – overheating, a burning smell, sparks. Unplug the appliance and get it checked right away. Here are some things you can do to prevent electrical accidents.

Keep cords and electrical appliances away from water.

Do not put cords under rugs, through door ways or near heaters. Check cords for damage before use.

Extension cords must have a big enough wire for larger appliances.

If you have a broken plug, outlet or wire, get it fixed right away. Use a ground on 3-wire plugs to prevent shock in case of electrical “fault.”

Do not overload outlets with too many plugs.

Use three-prong adapters when necessary.

Smell Gas?

Open windows and doors.

Shut off the appliance involved. You may be able to refer to the front section of your telephone book for instructions regarding turning off the gas to your home.

Don't use matches or turn on electrical switches.

Don't use telephone – dialing may create electrical sparks.

Don't light candles.

Call the gas company from a neighbor's home.

If your gas company offers free annual inspections, take advantage of them.

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Fire

Pre-plan and practice your fire escape. Look for and plan at least two ways out of your home. If your fire exit is through a window, make sure it opens easily. If you are in an apartment, know where the exit stairs are located. Do not use an elevator in a fire emergency. You may notify the fire department ahead of time if you have a disability or special needs.

Here are some steps to help you prevent fires:

Install smoke detectors. They are your best early warning. Test frequently and change the battery every year.

If there is oxygen in use, place a "No Smoking" sign in plain view of all persons entering the home.

Throw away old newspapers, magazines, and boxes.

Empty waste baskets and trash cans regularly.

Do not allow smoking in bed or while on medicines which may cause drowsiness.

Never empty ashtrays or toss matches into wastebaskets unless you know they are out. Wet down first or dump into the toilet.

Have your chimney and fireplace checked regularly. Look for and repair cracks and loose mortar. Keep paper, wood and rugs away from area where sparks could hit them.

Be careful when using space heaters.

Follow instructions when using heating pad to avoid serious burns.

Check your furnace and pipes regularly. If nearby walls or ceilings feel hot, add insulation.

Keep a fire extinguisher in your home and know how to use it.

If you have a fire or suspect a fire:

1. Take immediate action per plan. Rescue – Escape is your top priority.
2. Get help on the way – with no delay. Your emergency service number is **911**.
3. If your fire escape is cut off, close the door and seal the cracks to hold back the smoke. Signal help from the window.
4. If you are dependent on utilities (gas, phone, and electricity) register as a high priority customer with company.

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Waste Containment/Disposal – See Handout Next Page

1. Wash hands before and after handling medicines and supplies.
2. Avoid recapping needles whenever possible to avoid possible injury from needle sticks.
3. Used needles should never be bent, broken or taken off syringes before throwing away.
4. Used syringes, needles and blood are all regulated waste and must be disposed of properly.
5. Put your used needles and syringes in a puncture resistant container. When your container is $\frac{2}{3}$ to $\frac{3}{4}$ full or your therapy is complete, dispose of as instructed. **DO NOT THROW IN THE TRASH.** DO NOT overfill container and NEVER FORCE items into container.
6. BROOKS HEALTH CARE, INC. WILL PICK UP THE SHARPS CONTAINER as it becomes full during, and at the end of your therapy.
7. Disposable items such as bags and tubing's may be thrown into the trash unless otherwise instructed.
8. Double plastic bags should be used for disposal of the following items: soiled tissues, sanitary napkins, dressings, used gloves and disposable gowns. Dispose of all liquid waste as instructed.
9. Wash hands after removing gloves. _____

Emergency Preparedness

BROOKS HEALTH CARE, INC.
Office Hours: 8:30am to 5:00pm Monday – Friday
24 Hour On-Call Pharmacist and RN

Fresno – (559) 233-4663 Merced – (209) 382-2273 Visalia – (559)798-4663

BROOKS HEALTH CARE, INC. DELIVERY PERSONNEL ARE NOT REQUIRED TO BE TRAINED IN CPR OR PERFORM CPR IF NEEDED

**FOR EMERGENCY MEDICAL ASSISTANCE
DIAL 911**

In case of a DISASTER, a BROOKS HEALTH CARE, INC. employee will attempt to contact you. If you need non-emergency assistance prior to our phone call, you may attempt to contact us or call one of the following.

Your local hospital: _____ (fill in)

Your local physician: _____ (fill in)

Tune to your TV to local stations _____ or tune your radio to KMJ 580 AM for local disaster information. You may also refer to the First Aid Survival Guide in front of your Pacific Bell Phone Book.

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FDA Consumer Health Information

www.fda.gov/consumer/updates/drug_disposal062308.html

How to Dispose of Unused Medicines

Is your medicine cabinet filled with expired drugs or medications you no longer use? How should you dispose of them?

Most drugs can be thrown in the household trash, but consumers should take certain precautions before tossing them out, according to the Food and Drug Administration (FDA). A few drugs should be flushed down the toilet. And a growing number of community-based “take-back” programs offer another safe disposal alternative.

Guidelines for Drug Disposal

FDA worked with the White House Office of National Drug Control Policy (ONDCP) to develop the first consumer guidance for proper disposal of prescription drugs. Issued by ONDCP in February 2007, the federal guidelines are summarized here:

- Follow any specific disposal instructions on the drug label or patient information that accompanies the medication. Do not flush prescription drugs down the toilet unless this information specifically instructs you to do so.
- If no instructions are given, throw the drugs in the household trash, but first:
 - Take them out of their original containers and mix them with an undesirable substance, such as used coffee grounds or kitty litter. The medication will be less appealing to children and pets, and unrecognizable to people who may intentionally go through your trash.
 - Put them in a sealable bag, empty can, or other container to prevent the medication from leaking or breaking out of a garbage bag.



Take drugs out of their original containers and mix them with an undesirable substance, such as used coffee grounds...

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FDA Consumer Health Information

- Take advantage of community drug take-back programs that allow the public to bring unused drugs to a central location for proper disposal. Call your city or county government's household trash and recycling service (see blue pages in phone book) to see if a take-back program is available in your community.

FDA's Director of Pharmacy Affairs, Ilisa Bernstein, Pharm.D., J.D., offers some additional tips:

- Before throwing out a medicine container, scratch out all identifying information on the prescription label to make it unreadable. This will help protect your identity and the privacy of your personal health information.

- Do not give medications to friends. Doctors prescribe drugs based on a person's specific symptoms and medical history. A drug that works for you could be dangerous for someone else.

- When in doubt about proper disposal, talk to your pharmacist.

Bernstein says the same disposal methods for prescription drugs could apply to over-the-counter drugs as well.

Why the Precautions?

Disposal instructions on the label are part of FDA's "risk mitigation" strategy, says Capt. Jim Hunter, R.Ph., M.P.H., Senior Program Manager on FDA's Controlled Substance Staff. When a drug contains instructions to flush it down the toilet, he says, it's because FDA, working with the manufacturer, has determined this method to be the most appropriate route of disposal that presents the least risk to safety.

About a dozen drugs, such as powerful narcotic pain relievers and other controlled substances, carry instructions for flushing to reduce the danger of unintentional use or overdose and illegal abuse.

For example, the fentanyl patch, an adhesive patch that delivers a potent pain medicine through the skin, comes

with instructions to flush used or left-over patches. Too much fentanyl can cause severe breathing problems and lead to death in babies, children, pets, and even adults, especially those who have not been prescribed the drug. "Even after a patch is used, a lot of the drug remains in the patch," says Hunter, "so you wouldn't want to throw something in the trash that contains a powerful and potentially dangerous narcotic that could harm others."

Environmental Concerns

Despite the safety reasons for flushing drugs, some people are questioning the practice because of concerns about trace levels of drug residues found in surface water, such as rivers and lakes, and in some community drinking water supplies. However, the main way drug residues enter water systems is by people taking medications and then naturally passing them through their bodies, says Raanan Bloom, Ph.D., an Environmental Assessment Expert in FDA's Center for Drug Evaluation and Research. "Most drugs are not completely absorbed or metabolized by the body, and enter the environment after passing through waste water treatment plants."

A company that wants FDA to approve its drug must submit an application package to the agency. FDA requires, as part of the application package, an assessment of how the drug's use would affect the environment. Some drug applications are excluded from the assessment requirement, says Bloom, based on previous agency actions.

"For those drugs for which environmental assessments have been required, there has been no indication of environmental effects due to flushing," says Bloom. In addition, according to the Environmental Protection Agency, scientists to date have found no evidence of adverse human health effects from pharmaceutical residues in the environment.

Nonetheless, FDA does not want to add drug residues into water systems unnecessarily, says Hunter. The agency is in the process of reviewing all drug labels with disposal directions to assure that the recommended methods for disposal are still appropriate.

Another environmental concern lies with inhalers used by people who have asthma or other breathing problems, such as chronic obstructive pulmonary disease. Traditionally, many inhalers have contained chlorofluorocarbons (CFC's), a propellant that damages the protective ozone layer. The CFC inhalers are being phased out and replaced with more environmentally friendly inhalers.

Depending on the type of product and where you live, inhalers and aerosol products may be thrown into household trash or recyclables, or may be considered hazardous waste and require special handling. Read the handling instructions on the label, as some inhalers should not be punctured or thrown into a fire or incinerator. To ensure safe disposal, contact your local trash and recycling facility.

This article appears on FDA's Consumer Health Information Web page (www.fda.gov/consumer), which features the latest on all FDA-regulated products. Sign up for free e-mail subscriptions at www.fda.gov/consumer/consumerenews.html.

For More Information

Proper Disposal of Prescription Drugs Fact Sheet and Video Clip
www.oncdp.gov/drugfact/factsht/proper_disposal.html

SMARxT Disposal Campaign
www.smarxtdisposal.net

Albuterol Inhalers: Time to Transition
www.fda.gov/consumer/updates/albuterol053008.html

■ Glossary of Terms

Administration Set – Tubing. Used to connect solution or medicine to the catheter or needle.

Alcohol Swab – A small piece of gauze soaked in alcohol. Used to wipe off an area to make it sterile.

Amino Acid Solution – The building blocks for making protein.

Antibiotic – Medicine used to fight an infection.

Aseptic – Free of germs or sterile.

Aspiration – Accidentally inhaling formula into the lungs.

Constipation – Having a few bowel movements that are very hard and sometimes painful.

Contaminated – Dirty, should not be used..

Dehydration – When you do not have enough water in your body. Causes include diarrhea, vomiting, large output from a stoma, or fever. If you are dehydrated, you may feel thirsty and be urinating less.

Diarrhea – Frequent loose, watery bowel movements.

Duodenum – The first part of the small intestine.

Electrolyte – A chemical in your body necessary for cells to work properly. Examples are: Sodium, Potassium, Calcium, Magnesium, etc.

Entry Site – The place where a catheter goes into your abdomen

Exit Site – The place where a catheter comes out of the skin.

Expiration Date – The month and year written on medicines, solution, TPN bag labels and other product containers. The product should not be used past the date.

Glucose – A sugar also called Dextrose. It is the main sugar in blood and body fluids. Glucose also provides calories in the formula.

Infuse – To put a medicine or solution into a catheter.

Infusion Pump – A pump used to move the medicine or solution through the tubing and into the body.

Inject – To put a medicine or solution into a catheter.

Injection Cap – Rubber stopper on the end of the catheter used to put medicine or solution through.

Injection (medicine) Port – A small , rubber stopper on the solution bag or catheter where medicines can be added.

Insulin – A substance secreted by the pancreas, which controls blood sugar, levels. It may be given I.V. or S.C. to control blood sugar levels when the body's own insulin is not enough.

Intermittent – Off and on, not all the times.

Jejunum – Second part of the small intestine.

Lethargy – Feeling tired or sleepy. No energy.

Liter – used to measure liquid. Almost equal to one quart.

ML (milliliter) – used to measure liquid. 1mL is the same as 1cc.

Needless Connector – See *Connector*.

Nutrients – Parts of food that nourish the body – protein, carbohydrates, fat, vitamins, minerals and water.

Occlusion – Clotting, plugging or closing off the tube so nothing goes through.

Occlusion Clamp – A special clamp used to pinch the catheter or tubing.

Ostomy – An opening made during surgery from the bowel to the outside of the body.

PEG – Percutaneous Endoscopic Gastrostomy. A feeding tube that is placed in the stomach. A hollow tube with a light on it is placed through the mouth into the stomach to help the doctor put the tube in the correct position.

Peripheral – Area on arms, hands, legs.

Povidone-Iodine Swab – A small piece of gauze soaked in povidone-iodine. Used to wipe off an area to make it sterile.

Prime – See *Purge*.

Rate- How fast the solution goes into the catheter

Residual- Contents of stomach since the last meal.

Sepsis – Infection in the blood stream causing chills and fever.

Sporicidal – Destroys bacteria or other germs.

Sterile – Free of any bacteria or other germs.

Stoma – Opening made during surgery through which a feeding tube enters the body.

Symptom – Sign of a particular illness.

Systemic – Refers to affecting the whole body.

Tapering – Slowing down an infusion of solution to prevent low blood sugar.

Vial – A small bottle, which has a rubber top and holds more than one dose of medicine.

Vial Access Spike – A small device used to access a vial to withdraw solution into a syringe.
