



Awards & Recognition

Doctors Community Hospital has been awarded the **Distinguished Hospital for Clinical Excellence Award** for performing in the top 20% nationally for all care, and the **Distinguished Hospital for Specialty Excellence Award** for Stroke care. We have also been awarded **Five Stars** for clinical excellence for Stroke, Cardiac, Pulmonary, Critical Care, Vascular, Orthopedic and Gastrointestinal care for the past six years.



U.S. News & World Report has repeatedly ranked Doctors Community Hospital as one of **America's Best Hospitals**.



CARESCIENCE

CareScience reports that Doctors Community Hospital is among the **Top Performers in its Select Practices** for Stroke, Cardiac, Respiratory, Diabetes and Genitourinary care; and is 20% less expensive; has a 15% lower complication rate; a 10% lower length of stay; and a 10% lower mortality rate.



Our patients have rated us in the **Top 5%** of all hospitals in the nation for their satisfaction with our Emergency Center and in the **Top 7%** for Outpatient Services, according to The Jackson Organization.



Doctors Community Hospital is **Fully Accredited** by The Joint Commission on Accreditation of Healthcare Organizations (JCAHO).



8118 GOOD LUCK ROAD, LANHAM, MARYLAND 20706
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FOR ADDITIONAL INFORMATION, PLEASE CONTACT THE OFFICE OF COMMUNITY SERVICES AT 301/552-8060

Serving The Community

In recognition of our community's growing healthcare needs, we have expanded our services. With an 18% rate of diabetes, we opened **The Joslin Diabetes Center**, the nation's premier, comprehensive diagnosis, education, fitness and treatment program, affiliated with Harvard University.

Due to significantly higher rates of mortality for African American women from breast and gyn cancers, we opened **The Women's Health Center**, which offers specialized education, diagnosis, treatment and support services unique to the women of Prince George's County.

Our expanded **Cardiac Services** now include emergency cardiac angioplasty. A new **Vascular Access Clinic** has improved care for patients on dialysis. **The Wound Care Center** provides comprehensive care for the unusually large number of individuals in our community with non-healing wounds and will offer the area's only hyperbaric oxygen chamber as of July 2006.

Our commitment to **community health outreach and advocacy programs** reflects our comprehensive approach to investing in the overall well-being of our community. We unequivocally understand how essential it is to invest in both our community's future healthcare workforce and its economic development. We now provide several **scholarships** to area residents for 2 and 4-year nursing, respiratory and radiology training programs. Through these combined initiatives, we provide the equivalent of **over \$4,000,000 in Community Benefit** each year.

Centers of Excellence

- Cardiac Care
- Stroke Care
- Neurosurgery & Neurology
- Orthopedics
- Cancer Care
- Vascular Surgery
- General Surgery
- Urologic Surgery
- Diagnostic Services
- The Emergency Center
- Rehabilitation
- Ambulatory Surgery Center
- The Joint & Spine Center
- The Women's Health Center
- The Joslin Diabetes Center
- The Wound Care Center
- The Sleep Disorders Center
- Magnolia Gardens Skilled Nursing Center

ANSWERS TO YOUR QUESTIONS



Passion for caring.

Intensive Care Unit



INFORMATION FOR PATIENTS AND THEIR FAMILIES

INTENSIVE & CRITICAL CARE SERVICES

At Doctors Community Hospital, we are proud of our staff’s dedication to their patients and to excellence in service. Our goal is to assure that you receive the best quality care. If you wish to comment on your experience, please feel free to call our Patient Action Line at 301/552-0899 or ask to speak with a supervisor.

IMPORTANT NUMBERS:

- Surgical Intensive Care Unit (SICU).....301/552-8006**
- Medical Intensive Care Unit (MICU).....301/552-8007**
- Intermediate Care Unit (IMCU).....301/552-8206**
- Main Hospital301/552-8118**
- TTY301/552-8078**

If you have any major questions or concerns, please contact the Critical Care Charge Nurse on duty at 301/552-7982.

INFORMATION I WANT TO REMEMBER:

exception. Please first ask the nurse caring for your loved one for permission, if you need more than two visitors in the room at one time.

Can children visit in the ICU?

For several reasons, including risk of infection to both the child and the patient, we do not allow children 12 or younger in the ICU. However, our staff does understand that at certain times families need to be together. Please ask the nurse for authorization before bringing any child(ren) into the ICU. We do ask that if your child is granted permission to visit that, you limit the visit to less than 15 minutes.

If you have any other questions, please do not hesitate to ask your loved one’s nurse for assistance.

AFTER YOUR FAMILY MEMBER LEAVES THE ICU:

Once your loved one is discharged from the ICU, they may go to one of the following areas of the hospital:

- Telemetry (5th Floor) 301/552-8685**
- Fourth Floor 301/552-8064**
- Third Floor (East)..... 301/552-8063**
- Third Floor (West)..... 301/552-8863**

VISITATION:

In general, you may visit 24 hours a day, as long as it is helpful for your loved one. Please be mindful of how important it is for you to get plenty of rest. Too much stress, along with little rest, can cause you to become sick yourself! The nurses can help you decide whether your loved one needs you to stay with them.

There are key times, at change of shift, when nurses and doctors are updating each other on the status of their patients. These times are from 7 am to 7:30 am, at 9 am to 10 am; at 3 pm to 3:30 pm, at 7 pm to 7:30 pm and again at 11 pm to 11:30 pm. During these times we all must respect patient privacy, and therefore ask that you either stay in your loved one's room, wait in one of the Critical Care waiting areas, or take a break and visit the Good Luck Café (cafeteria) or our Gift Shop. These are located on the first floor of the hospital and the locations are noted in our Visitor's Guide.

Will I be able to stay in the room at all times?

While we do have open visiting, there are times when the nurse may ask you to step out of the room, due to activity in the ICU and/or a patient's condition. If this happens, you can wait in one of the critical care waiting areas until you are able to return to your loved one's room. Please be considerate of the nurse's requests, as sometimes privacy is necessary in order to care for your loved one or other patients.

How many visitors can be in the room at one time?

In general, we ask you have only two (2) visitors in the room at a time. Other visitors may wait in one of the three waiting room areas found on the 2nd floor. Of course, the staff understands there may be a need for an

AN INTRODUCTION TO INTENSIVE AND CRITICAL CARE SERVICES

Thank you for choosing Doctors Community Hospital. This booklet was created by our Intensive Care Team to address common questions our patients and their families have about Intensive and Critical Care Services and to explain why we need your support in complying with patient care and privacy requirement. Please feel free to ask any question—truly there are no “wrong” questions. We realize this is a stressful time for you, and often stress can make it difficult to understand and remember unfamiliar information. Therefore we encourage you to ask questions, more than once if necessary.

What is Critical Care?

The staff on our Critical Care Units provides care and treatment for patients with sudden, life-threatening illnesses or injuries. Your loved one could be in one of our three critical care units: Medical Intensive Care Unit (MICU), Surgical Intensive Care Unit (SICU), or Intermediate Care Unit (IMCU).

Critical care services are provided by highly experienced doctors, nurses, respiratory therapists, pharmacists and other health care professionals who have special training to ensure the best outcome for critically ill patients.

What type of illness or injury requires critical care?

Patients are most frequently admitted to the ICU if they have had a heart attack, stroke, pneumonia, poisoning or after surgery or if they have had a complication from surgery, as well as for other reasons, if the doctor feels it is necessary.

HOW DOES OUR PRIMARY MEDICAL DOCTOR WORK WITH THE INTENSIVE CARE TEAM?

Your family or primary medical doctor is an important link in providing a complete medical history for the patient and should be aware of your loved one's beliefs and concerns regarding treatment options. The Intensive Care Team works closely with the patient's primary doctor to determine existing illnesses, allergies, medications and other factors affecting the health of your loved one.

WHO IS ON THE INTENSIVE CARE TEAM?

Our Intensive Care Team is comprised of a number of highly trained health care professionals who provide specialized treatment and teach patients and their families how to care for their specific injury or illness. The team develops the plan of care, diagnoses and treats your loved one, and explains the healing process. They also teach adaptive and coping skills, when needed. Our Intensive Care Team consists of:

- Intensivists
- Critical Care Nurses
- Critical Care Technicians
- Respiratory Therapists
- Registered Dietitians
- Pharmacists
- Physical & Occupational Therapists
- Social Worker or Case Manager

If some of these titles are unfamiliar to you, the following should help explain their roles.

Intensivist:

An Intensivist is a board certified physician who specializes in the care of critically ill patients. Intensivists use a team approach to patient care

And, last but not least, if you have questions or concerns, please ask us!

What should I say to my loved one, who is a patient?

Speak normally, but please keep in mind that your loved one may not be able to respond to you. This may be a result of their condition, medication or a breathing (endotracheal) tube. You should still speak with your loved one, even if he or she is confused or in a coma. If your loved one is alert, and has a breathing tube in place, ask questions that can be answered with "yes" or "no" nods. If your loved one is able, help them to write brief answers (please do not hesitate to ask a nurse for paper and pencil). Occasionally, too much noise or too many visitors can cause the patient's blood pressure, heart rate or breathing to be affected. The nurses may ask you to step out of the room until the patient has calmed down and may give you directions on how you can help in other ways.

Can I touch my loved one?

Yes, touching usually makes your loved one feel better. The nurses will let you know if this is interfering with rest, treatments or any procedures they are doing.

Should I bring anything from home?

Familiar things make people feel better, however please check with the nurse before bringing anything into the ICU. Photographs, cards, pajamas and robes are usually fine. Please do not hang anything on the walls without first checking with the nurse.

What is the best way to share information with family and friends?

In order to respect patient privacy (HIPAA regulations), we ask that families select a family spokesperson. Our team will share information only with the spokesperson. Often the patient will designate their spokesperson. That individual must be able to understand the patient's medical condition correctly, as they will be both the point of contact for the doctors and nurses and will share information within the family and with others. You will need to decide what medical information and with whom you want to share it. Many family members and friends will be anxious to hear how your loved one is doing, will want to know what is wrong and will ask how they can help. Our team will direct incoming calls to the family spokesperson.

WHAT IS MY ROLE IN CARING FOR MY LOVED ONE?

How can I help?

Please bring in any papers, such as an Advanced Healthcare Directive, a Living Will or a list of medications your loved one is currently taking. Again, please choose one family member to be a link (spokesperson) between the family and the Intensive Care Team. This gives the nurse more time to care for patients, and helps protect the patients' privacy.

There are a few things we recommend you avoid:

- Please don't wear perfume or cologne—patients are often sensitive to smells.
- Please don't bring flowers into the ICU— they carry bacteria.
- Please don't use a cell phone or computer—they can interfere with the equipment used to monitor your loved one.

by coordinating nursing staff, consulting physicians, pharmacists, respiratory therapists and other members of the ICU team in order to provide the best care.

Respiratory Therapist:

Respiratory therapists monitor our patients to make sure each is receiving enough oxygen. This process is called airway management. Treatments may include oxygen therapy, mechanical ventilation (a breathing machine), and aerosol medication therapy (breathing treatments and nebulizers). Respiratory Therapists also provide education to patients and their caregivers.

Social Worker / Case Manager:

A Social Worker or Case Manager will often work with you and your loved one to help prepare for physical or emotional needs of the patient during or after hospitalization. They help plan for care after your loved one is discharged. Occasionally a patient may need special equipment, home-based nursing or rehabilitation services, or an alternative placement for further care. In addition to coordinating these services, our social worker can help with accessing other community services, identify possible funding sources for medications and coordinate follow-up medical treatment.

Pastoral Care:

The Pastoral Care staff at Doctors Community Hospital is an integral part of the hospital's patient care team, and is available to help in a variety of ways, depending upon individual preferences. The chaplain is available to provide spiritual support. If you would like to speak with a chaplain, please press "0" for the operator and ask for a chaplain to be paged.

WHAT QUESTIONS SHOULD I ASK & WHEN, AND HOW DO WE KEEP FAMILY INFORMED?

What should I ask the doctor?

Often it is hard to remember all the questions you want to ask your loved one's doctor. It may be helpful to you if you write down your questions and concerns as you think of them. We have provided space for you to do this on the inside cover of this pamphlet.

The following is a list of commonly asked questions:

- What is wrong with my loved one? Can it be cured?
- How will this affect the way my loved one lives?
- What is the treatment plan?
- When should I see my loved one start to get better?
- What are some of the risks from the therapy or treatments?
- Are they in any pain? What is being done to help the pain and fear?
- How is food provided?
- Is my loved one receiving the medicines he or she was on at home, and if so, will they be on these medicines when they go home?

The doctors may not be able to immediately answer all these questions for you.

What should I ask the nurse?

Since the nurses are caring for your loved one on-site 24 hours a day, they may be the best person to ask about your loved one's comfort, treatments or therapies.

The following is a list of questions often asked of our nurses:

- Who are the doctors that are caring for my loved one?

- Which doctor is in charge?
- Is there anything planned for the day that might hurt my loved one? If so, has pain medicine been ordered?
- If the nurse is not in the room, how do I call for help? How quickly should I expect someone to respond to the call?
- How does my loved one go to the bathroom?
- Will you explain the purpose of all the lines, tubes, and equipment?
- What can I do to help?
- What can I do to help my family and myself?
- What happens if something happens and I am not here? How will you contact me?

You may always ask the nurse to further explain what the doctor has told you.

How often should I ask for updates / information?

In general, you should receive daily updates from our Intensive Care Team. If changes or events occur, you may need to speak with the doctor more frequently. The nurse is available to keep you informed about events of the day and to provide explanations. While a number of doctors may see your loved one while he/she is in the ICU, it is usually the Intensivists who will provide updates about changes in status and recommendations for treatment. We ask that you ***pick one individual to serve as the spokesperson for the family***. You should check with the patient to see who he or she wants this person to be. Please give the nurse the name and contact information, such as telephone numbers (home, work, and cell) for the designated spokesperson. If there are difficult decisions and/or confusing information, the nurse or social worker/case manager can often arrange a private or group meeting with the doctor.