Patient Advocate Checklist For:

Name of Patient

An advocate is not a Health Care Proxy and can not make decisions for the patient. The advocate should know who the Health Care Proxy is and who to call in case of emergency.

Complete the following information and be sure your health care provider, family and advocate have a copy. Remember to discuss this information with your advocate during or immediately upon completion.

My Advocate(s):

My patient advocate’s duties will / can include (check all that apply):

_____ Check and verify medication.

_____ Verify procedure is being done to correct body part.

_____ Help me organize and understand lists of instructions.

_____ Can help me with decisions (health care proxy is on file)

_____ May not make decisions for me (health care proxy is ________________________)

_____ Choose appropriate food/menu items.

_____ Assist with bathroom use, if permitted by the healthcare team.

_____ Assist with bath if permitted by the healthcare team.

_____ May be present when the doctor speaks with me.

_____ Other, Explain

__________________________

__________________________

Trained patient advocates are aware of privacy and do not need to be part of exams or procedures. If the next two are checked, the advocate can still be asked to leave the room at any time only by the patient or healthcare team.

_____ May be with me during exams

_____ May be with me during procedure

Other Information

__________________________________________

__________________________________________

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Learning Confidential Information

You may hear information about the patient’s health care that is highly confidential. Information about past illnesses, present illnesses, or diseases may be discussed in your presence by the patient and health care provider. Other information that may be discussed include height, weight, medications, and allergies. As an advocate, you must remember to keep all information completely confidential. Unless you are the health care proxy, too, you will not be making decisions for the patient but will be making sure the patient is capable of making his or her own decisions, or making sure the appropriate family member or health care proxy has the information needed to make decisions.

Do not discuss at a later time what you heard about the patient. Be considerate and don’t ask them about their drug addiction, alcohol addiction, or tubal ligation if you hear these are parts of their medical history.

Advocates do not have access to the patient’s chart unless the patient requests this. Your role in helping to make decisions is strictly based on the information the patient shares with you. Doctors or nurses should not be expected to share information with you unless the patient has given prior permission for them to do so.

A patient advocate should have a notebook to begin keeping records for the patient. The notebook should list:

- Doctors’ names, addresses, telephone numbers, and e-mail addresses.
- Medications the patient takes, including over-the-counter medicines and herbal supplements.
- The pharmacist’s name, address, telephone number, and e-mail address.
- Addresses of hospitals and other health care facilities.

The notebook should also contain:

- Questions to ask the doctor.
- Doctors’ answers to all questions.
- Instructions about follow-up appointments.
- Information from follow-up phone calls about test results.
- A list of family members and friends who are helping the patient, including their contact information.

This notebook will become a history of the patient’s care, making it easy for the patient and the patient advocate to retrieve and share information with designated health care professionals and family members.
Helping the Patient Prepare for the Doctor

It is important to prepare for doctor visits as far in advance as possible. Such preparation includes keeping track of all medication the patient currently takes, getting any required forms in advance for the patient to fill out at home, ensuring the patient will have enough time with the doctor, and helping the patient to see the doctor in a group practice or clinic with whom he or she is most comfortable. If the patient is and remains uncomfortable speaking with the doctor, encourage the patient to change doctors. Ask for recommendations from trusted friends or other doctors.

Following these tips will help the patient and the patient advocate prepare for the doctor visit:

If you take a list of medications: List prescription medicines, vitamins, herbal supplements, and any over-the-counter medicines, such as cold medicines or stomach antacids, the patient currently takes. Include:

- The patient’s name.
- All of the patient’s allergies, including any medication allergies or bad reactions the patient has had in the past.
- Dosage of each medication.
- Number of times each day the patient takes the medication.
- Actual times the patient takes the medication.
- When the medication was started.
- When the medication was or will be stopped.
- Name of the doctor who ordered the medication.
- Reason the medication was started.
- Reason the medication was or will be stopped.

If you “brown-bag” it: Instead of listing all the medications the patient currently takes, you may prefer to put all the prescription and over-the-counter medicines, vitamins, and herbal supplements in a bag to take to the doctor’s office. Be sure all medications are closed tightly before putting them into the bag and that the original labels are in place. Also, look inside each bottle to be sure the patient did not combine medications. Sometimes patients remove medications from their original containers and put them into containers that are easier to handle. If you see they have done this try to discourage it in the future.

The advocate can call ahead to find out how long the patient will have to wait to see the doctor. Long waits may make patients’ blood pressure rise or may cause them to want to rush through the visit. It may be up to you, as the patient advocate, to ask those who schedule the appointments for enough time—from the patient’s point of view—to talk with the doctor.

Try to call the doctor’s office at least one week before the appointment and ask them to send you a copy of any questionnaires and forms that need to be completed before the patient sees the doctor. This way, the forms can be completed and questions answered at home, in private and without rushing. Most doctors’ offices will be happy to mail this information in advance and have you return the completed forms at the time of the appointment.

Bring your notebook with a list of questions for the doctor. Include the patient’s symptoms and concerns, and any research you have done on the symptoms.

If you are not sure which doctor the patient will be seeing in a large clinic or group, ask. If the patient is more comfortable with one doctor than another, tell the office staff in advance. If it isn’t possible for the patient to see the doctor of his or her choice, prepare the patient accordingly.
Ask the patient whether he or she would like you to be in the exam room. Don’t be offended if the patient does not want you there. It will be up to you and the patient to remind the doctor that you need to be present after the exam to help ask questions and note the answers. It is best for the patient and patient advocate to make these arrangements before the doctor visit.

If the patient is not physically able to dress or care for him- or herself, you may need to discuss the patient’s concerns with the nurse and be available to help. Respecting the patient’s privacy is the best way to convey respect and sensitivity and get the relationship off to a good start.

Prepare the patient appropriately for the doctor visit, allowing plenty of time for waiting, the exam, any required testing, and filling prescriptions.

**Tips for Choosing a Doctor**

- Research physician profiles by state. Some states maintain lists that include doctors’ background information, but beware: the information is not always objective because it is reported by the doctors themselves. It also may not be current.
- Ask doctors you respect whom they would see if they or a family member were the patient.
- Ask friends and family members whom they have used and would recommend. Some prefer a good bedside manner and some prefer a doctor who has been around for 40 years. What matters most to the patient is what’s important.
- If you know someone who works in the hospital with which a doctor is associated, ask his or her opinion.

**In the Doctor’s Office**

When arriving at the doctor’s office, be prepared to wait. The patient will have to read and sign forms (if the patient has not done this in advance), be examined, listen to what the doctor says, ask questions, note the answers, and get information about any necessary follow-up care. It is best for the patient to decide before the appointment whether the advocate will accompany the patient into the exam room. The advice in the following sections will help to make the doctor visit as informative and relaxed as possible.

**In the Waiting Room**

The advocate should be patient while waiting for the doctor. Read, chat with the patient, or bring a crossword puzzle book to occupy your time. Do not discuss confidential information that may make the patient feel uncomfortable in the waiting room. This can be a stressful time for the patient. Do what you can to relax, and to help the patient relax, before going in to see the doctor.

*Be sure the patient reads and understands all the forms before signing.* If the patient doesn’t understand the information in the required forms, either read and explain it, or ask the doctor or nurse for clarification or more information. If you will be helping to fill out forms for the patient, ask for a room where you and the patient can talk privately and where the patient will feel comfortable answering questions honestly. The doctor’s office may not have a private place where others can’t hear you, so consider how to handle this situation in advance. Are you capable of answering the questions for the patient? Can you get the information the forms require while waiting in the exam room for the doctor? The lack of privacy may jeopardize honest answers.

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In the Doctor’s Office and Exam Room

Ideally, the patient will introduce the advocate as a family member or a friend who is there to help, not necessarily as the patient advocate. The patient may or may not want the advocate in the room during the exam. This should have been decided earlier.

If the patient advocate will not be in the room during the exam, either the patient or the advocate should tell the doctor that the advocate will be present following the exam to write down instructions. That way, the doctor will have the advocate return immediately after the exam. If the patient does not want the advocate to write down any information, the patient should ask the doctor to do this. The patient needs to tell the doctor and the patient advocate, clearly, what he or she wants.

If the patient advocate will be in the exam room to help the patient get onto the table, get undressed, get dressed, or translate information, allow for privacy during the exam. The patient should feel comfortable with anyone who is in the room.

Do not ask questions during the exam. Patients should ask their own questions if they are able to. This is a time for the doctor to discuss pain, look for symptoms, and talk to the patient, if possible.

A Doctor’s Clear Handwriting is Essential

If the provider plans on writing down any information for the patient to take home, be sure to review it with the doctor and make sure you understand it before you leave the office. Can you read the doctor’s handwriting on all prescriptions? If you or the patient has any doubts, ask the doctor to print the prescription so you can read it.

Make sure the doctor includes the name of the medication, its generic name, the dosage, the time of day to take the medication, and how long the patient will need to take the medication. Ask whether the patient should avoid any other medications, foods, or alcohol while taking this medication. Ask what the side effects of the medication might be. You or the patient should verify all of this information when picking the medication up at the pharmacy.

Conversation after the Exam

Although it is best for the patient advocate to remain quiet while the doctor examines the patient, it is appropriate for the patient advocate to ask questions afterward. It may help to follow these tips:

- Make a list of your own questions, whether you are in the exam room or the waiting room.
- If the patient is alert and able to understand the doctor’s explanation of a procedure, symptoms, or other concerns, do not interrupt with questions. Write them down instead.
- Write down as much of the conversation as possible so the patient can go back and review it later.
- Never discuss or ask questions about your own experience, your own health, or your or your family members’ problems.

When the doctor and patient finish their conversation, the patient advocate can ask the patient for permission to ask the doctor a few questions. Getting the patient’s permission lets the health care provider know you are there in the patient’s best interests.
This may be the time to suggest research on the symptoms or the subject and to ask the doctor for the most reliable sources of information. If you’ve brought some information with you, the doctor may ask to see it to be sure it comes from a reliable source. This is an important concern because commercial Web sites often have products they are trying to sell, making it difficult to know whether the information is objective, research-based, and can be trusted.

Write down the date and time for the next appointment and the telephone number to call for any test results. You or the patient should call for test results, even if the office says they will call you. Never assume that no news is good news.

To schedule a workshop of the Family Centered Patient Advocacy Training and receive a Manual call Pulse CPSEA (516) 579-4711.