

PATIENT EMERGENCY PREPAREDNESS

In an impending emergency (power outage, flooding, fire) it is essential to have a safety plan in mind, but this is crucial for people with disabilities if they have needs for medication or equipment which is outside the normal range of availability.

It's important for another reason, as well: a person dealing with an emergency from a proactive stance will always have the advantage, mentally and physically, over the situation, and will be better equipped to 'get ahead of it' in the event that becomes necessary.

Three things will make an emergency less chaotic: supplies, communication and a support network.

Supplies

Supplies are often essential, and these should be in a state of constant preparedness. A few things tucked away in a bag in the hall closet will greatly diminish the panic in a crisis. An emergency bag should include at least a few days' worth of supplies and medication along with instructions for these medications and the subscriber/provider's name and phone number. Generally, this is a patient's general practitioner: having that name and number handy is vital for any questions, or if the house is uninhabitable, there would be a way to get an emergency prescription so the patient will not miss any doses of medication. If the person needs other daily supplies (incontinence supplies, spare clothing, or other medical items for their immediate care) also pack spares of this in the bag.

Communication

If you have a cell phone, make sure that and a spare charger is included in the supply bag. Most clinics and pharmacies use web-based sites to interact with their patients in the event an evacuation is extended.

Also, watch weather reports and alarms. Cell phones will now also alarm if bad weather is approaching, so a person with compromised mobility can decide ahead of time on the best means of staying safe. If travel may be necessary, a person with special needs should be prepared ahead of time to get to a safe zone.

A Support Network

In the event of an evacuation, consider the time demands of the person with a disability. A person with a prosthetic who is still learning to walk will not require as much time as a non-ambulatory person with a wheelchair which must be loaded and unloaded. There should be an ongoing, prearranged agreement with people who are willing and able to assist with evacuation measures. The location of the safe zone is also crucial: if that person is in a wheelchair a friend's house with stairs is an unsuitable option.

Firefighters deal with this kind of situation all the time. Your local fire department can help to create a plan if details prove to be a struggle. Ask them for suggestions, since they're well-connected with local resources and know the location of emergency centers.

Emergency plan preparedness is part of a proactive patient's self-care and management. Supplies, communication, and support will make a crucial difference in the successful implementation of a safety plan during an emergency, should it ever become necessary.

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BASIC HOME SAFETY

Fire Prevention

- No smoking or open flames around oxygen equipment.
- No smoking in bed.
- Install smoke detectors. Change batteries semi-annually.
- Keep oxygen in use signs posted and visible at all times.
- Keep working fire extinguishers on hand.
- Have a fire escape plan and practice it regularly.
- Post the fire department's number by all phones.
- Have all major electrical appliances grounded.
- Never break off a grounding prong of a three-prong plug.
- Check and replace all frayed or cracked electrical cords.
- Do not place electrical cords under carpet or rugs.
- Do not overload electrical outlets or extension cords.
- Keep flammable liquids away from all open flames or other heat sources.
- Never use bulbs in a light fixture with higher wattage than allowed by manufacturer.
- Have wood burning fireplaces inspected annually.
- Never store gasoline, kerosene or oil in living spaces.

Medications

- Keep all medications out of children's reach.
- Check expiration dates and dispose of outdated medications safely.
- Report any unusual side effects to physician immediately. Check with physician before changing amount of medication to take.

Fall Prevention

- Keep phone within easy reach.
- Replace dim, burned out or glaring lights.
- Falls happen at home for many reasons. There are several things that are known to add to your risk for falling: Poor vision or hearing, history of falls, poor nutrition, certain medications, being over 65 years old, conditions in the home such as slippery floors, loose rugs, cords on the floor.

Bathroom Safety

- Keep all electrical appliances such as razors, hair curlers, hair dryers, and radios away from water.
- Install grab bars on or around bathtub and elevated toilet seats and support rails on toilets.
- Use non-skid carpets, rugs and/or mats on floors.
- Install non-skid mats or strips in bathtub/shower.
- Keep a night light plugged in for after dark illumination.
- Install a handheld shower.
- Set the water temperature to 120° or less.

General Home Safety

- Have secure handrails on all stairs and keep stairways clear.
- Avoid using throw rugs.
- Use step stool or ladder for reaching high places, never use a chair.
- Wipe up liquid spills on non-carpeted floors immediately to avoid slips.
- Avoid unnecessary clutter and keep all walking paths clear.
- Keep a working flashlight handy at all times.
- Install night lights.
- Install or keep working smoke and carbon monoxide detector(s) in place.

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INFECTION CONTROL

How to Stop the Spread of Germs:

- Cover your mouth and nose when coughing or sneezing.
- Cough or sneeze into a tissue and then throw it away.
- Cover your cough or sneeze if you do not have a tissue.
- Then, clean your hands, and do so every time you cough or sneeze.

The Importance of Hand Washing

To keep yourself healthy, follow these guidelines:

- The single most important practice in preventing infection is frequent hand washing.
- Wash hands using a liquid antibacterial soap with lots of friction for about 20 seconds, rinsing thoroughly and drying hands with paper towels is recommended.
- Wash hands before and after patient contact and with removal of gloves.
- Use a 'hand sanitizer' (alcohol gel) frequently.
- Wash hands or use a hand sanitizer especial after touching body fluids (that is, respiratory secretions, stool, urine, vomitus) and potentially contaminated surfaces and materials.

Visitors in Your Home

You may consider asking friends and relatives who have colds, flu or infectious disease to postpone their visit until they are feeling better.



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