

# Patient Information Guide





## Welcome to Marshall

Our goal is to provide you with excellent care in a calm, healing environment. Your comfort and safety are our highest priorities. This guide has been designed to give you information you need for your stay.

If you have any questions about our services, policies or other information in this guide, please ask any member of your care team.

Thank you for choosing Marshall for your healthcare needs.

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## To Ensure Your Safety

- Inpatient, Emergency Department, and Surgery visitors are screened for symptoms of illness when visiting patient rooms or waiting in the lobby. Patients are screened before scheduled surgeries and upon admission.
- Staff and providers with direct patient care interaction wear the recommended personal protective equipment.
- Heightened precautions for sanitizing all patient care and public areas are in effect.



## NOTES

Questions for my physician or nurse

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# A Quick Guide for Your Visit

**Making Phone Calls** - For local calls, dial “9” and then the phone number. For long distance calls, dial “0.” Cell phones can be used in most patient rooms.

**Wireless Internet Services** - Wi-Fi services are available throughout the hospital, including in your room.

**Patient Meals** - You will be visited daily, or called on the telephone if you are in isolation, and will be assisted to select your food. If you have a special request, you may ask your nurse or call extension 2755.

**Visitors Meals** - The Marshall Hospital Café is open seven days a week, from 7 a.m. to 7:00 p.m. Freshly-prepared hot food is available for breakfast from 7 to 9:30 a.m., lunch from 11 a.m. to 2 p.m., and dinner from 4:30 to 7 p.m.

**Senior Citizens/Golden Club** - Free in-room meals for a spouse who is visiting you. See page 19 for details.

**Visiting Hours** - On the Medical and Surgical floors, visiting hours are typically from noon to 9 p.m.

Please see visitor policy (page 4 and 5).

**Gift Shop** - The Gift Shop is open Monday through Friday, from 9 a.m. to 3 p.m.

**Lost and Found** - Lost items are taken to the Security Department where they are kept for 30 days. After this, appropriate items are given to a local charity. Please call 530-626-2770, x6015 for assistance.

**Marshall is Smoke-Free** - We support a healthy, smoke-free environment for our patients and visitors. Smoking including the use of e-cigarettes, is not permitted by patients or visitors on Marshall property.

**Communication** - We encourage questions and want to know if there is anything we can do to make your stay more comfortable.

## Important Phone Numbers

Marshall Hospital .....	530-622-1441
Chaplain .....	530-620-5360
Food Services .....	530-626-2755
Patient Advocate .....	530-344-5428
Lost & Found .....	530-626-2770, x6015
Social Work .....	530-626-2756
Marshall Foundation for Community Health .....	530-642-9984

## TV Channel Guide

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13 KOVR CBS 13	30 The Learning Channel
14 Grit Movies	31 TNT
15 ESPN	32 TV Land
16 AMC Movies	33 History Channel
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# Your Room & Comfort

Rooms are assigned based on the kind of medical care you need, infection control principles, and room availability. Your room is equipped for comfort and safety. Nursing staff will show you how to use the following equipment:

- **Bed** - Each bed has an adjustable head and knee function. The bed will be kept in the lowest position with wheels locked for safety. Keeping the side rails up is advised.
- **Call button** - Ring the main station and a clerk or appropriate care provider will assist you.
- **Bathroom emergency bell** - Ring if you need assistance while in the bathroom.
- **Telephone** - For local calls in the 530 area code, dial "9" and the telephone number. For long distance dial "0" to reach the hospital operator.
- **Cellular phones** are permitted in patient rooms. However, out of respect for other patients and to encourage an atmosphere of healing, please keep cell phones in silent or vibrate mode. We encourage the use of texting, whenever possible, to minimize the disturbance to other patients who may be resting.
- **Television** - As a courtesy to your roommate, please use ear phones when watching television. Ear phones are available for your use.

Please discuss with your caregivers whether or not you should get out of bed without assistance.

Most inpatient rooms accommodate two patients with a shared bathroom. There is a common shower available on each patient unit, for those patients whose medical condition allows.

Patient room assignment may be changed during your hospital stay in response to safety needs including changes in patient condition.



**We depend on you, and your loved ones to tell us about how you are feeling. Write down concerns as you think of them and ask questions as often as needed.**

## Personal Items and Valuables

Please leave valuables such as cash, jewelry, and electronics at home. Any valuables that you cannot send home should be stored in the hospital safe. The hospital is not responsible for lost or stolen items. Please send the following items home: medications, vitamins, and personal electrical devices such as hair dryers. If you are unable to send medications home, they will be safely stored in the pharmacy. You may not store medications in your room during your hospital stay.

### What to Keep with You

- List of current prescriptions, over-the-counter medication, vitamins, and herbal supplements (not the medications themselves)
- List of any allergies
- Medical insurance cards and insurance forms
- Your advance directive
- Hearing aids and eye glasses – Keep in a case in the top drawer of your bedside table
- Dentures - Ask your nurse for a denture cup and keep it in your bedside table – away from your food tray or on the bed linen

### What Not to Bring During Your Stay

For the safety and comfort of all patients, visitors are asked not to bring **weapons, illegal drugs, drug paraphernalia, lighters, matches, or any potentially unsafe items** into the hospital. In addition, please avoid bringing **valuable personal belongings** such as large amounts of cash, expensive jewelry, or irreplaceable items. Marshall cannot guarantee the security of personal valuables, and restricting unsafe items helps maintain a safe environment for patients, visitors, and staff.

## Visitors

In the Emergency Department, Medical/Surgical, Telemetry, Intensive Care Unit (ICU), and Birth Center patients may have up to two visitors at a time. The Charge Nurse, Department Director, or House Supervisor may approve exceptions.

### Patients in Isolation

Visitors are required to wear appropriate personal protective equipment (PPE) before entering the patient's room. Visitors will be shown how to properly put on and remove PPE by staff.

### Visiting Hours and Limitations

- Intensive Care Unit visitation hours are open.
- Medical Surgical/Telemetry floors visiting hours are typically noon until 9 p.m. The Charge Nurse, Department Director, or House Supervisor may approve exceptions.
- Birth Center visiting hours are 24 hours a day, seven days a week. After delivery, recommended visitation hours are 9 a.m. to 9 p.m. to facilitate mother and baby recovery. Visitors shall be free of any signs or symptoms or illness (runny nose, cough, fever, etc.)
- There are times when it is not appropriate for visitors to be at the bedside. These include:
  - » A physician or care team member needs to speak privately with the patient or roommate
  - » A procedure is being performed
  - » A roommate needs to use the bathroom, bedpan or commode
  - » A roommate is being treated by a therapist or nurse

### Balloons and Flowers

Due to potential allergic reactions, latex rubber balloons are not permitted in the hospital. Mylar balloons are allowed. Flowers received while you are a patient will be delivered to your room, with the exception of ICU, or if you are under protective (immunosuppression) precautions.

## Zero Tolerance for Violence Toward Staff

Marshall is committed to maintaining a safe, secure, and respectful environment for everyone—patients, visitors, and staff. Our team is here to care for you. In return, we expect all interactions to remain respectful. Marshall has a zero-tolerance policy for violence, threats, abusive behavior, or prohibited weapons, including:

- Physical violence or attempts to harm others
- Threats (spoken, written, or implied)
- Threatening language or gestures
- Harassment or discrimination of any kind
- Possession of weapons or dangerous items, such as firearms or knives
- Damage to hospital property

### What this means

- Any form of threatening or abusive behavior will be taken seriously.
- Trained staff and/or Security will take immediate steps to protect everyone involved.
- Visitors will be asked to remove any weapons in their possession and return them to a safe place away from the hospital.
- Visitors may be restricted or asked to leave.
- Law enforcement will be notified when appropriate.

### How you can help

We ask all patients and visitors to:

- Treat others with respect and dignity.
- Communicate concerns calmly—our team is here to help.
- Follow staff instructions during safety situations.
- Report any concerning behavior to staff immediately.

We understand that healthcare situations can be stressful. If you are feeling overwhelmed, please let us know—we are here to support you.

***Thank You for Helping Keep Marshall Safe.***

# Your Health & Safety

## Patient Medication

A key element in safe medication use while in the hospital is careful communication between you, your physicians, nurses, and pharmacists. It is important that you share the following to help ensure medication safety during your stay.

- Provide a current list of all medicines, including non-prescription medicines as well as dietary and herbal supplements.
- Provide a complete list of allergies and the type of reaction you experienced. This includes food and other allergies.
- Explain how you actually take your medication, especially if this is different from the originally prescribed directions.

To treat your condition while you're in the hospital, and for your follow-up care, you may be prescribed new medications you are not familiar with. For your safety, your nurse will verify your identity and compare this with information on the medication record before medication is given to you. Your nurse will provide the following information regarding each of your medications the first time it is administered:

- Medicine name
- Why it is being given
- Possible side effects
- The dose or strength
- How often it will be given

Ask for information about your medicines in terms you can understand, including why you are taking them.

### **Everyone reacts differently to medications. Things that you can do to ensure medication safety:**

- Notify your nurse if you have any unexpected symptoms after taking a medication, especially if this is a new medicine for you. These may include:
  - » Nausea, vomiting, or diarrhea
  - » Back pain, chest pain, leg cramps or headache
  - » Bleeding gums, nosebleed, or bloody stool



**Prevent infection by washing your hands or using hand sanitizer often. Don't hesitate to remind your care team members to do the same.**

- » Dizziness, faintness, or heart palpitations
- » Anxiety, difficulty sleeping, or suicidal thoughts
- Make sure you have a special wristband stating you have an allergy. Let your nurse know right away if that wristband comes off.
- If you have any questions or concerns regarding your medication, you can request to speak to a pharmacist.
- Speak up if you have questions or concerns. If you don't understand something, it's ok to ask again.
- You and your family members play a vital role by becoming an active and informed member of your healthcare team.

## Equipment Safety

It is likely that you'll use medical equipment such as an IV Pump and/or other equipment during your stay. If you are unsure if a device is working properly, press your call button to tell your nurse your concerns. Do not turn off alarms or attempt to change the settings on medical equipment. Do not allow family members to adjust settings on any medical equipment. For your safety do not leave the main hospital building with medical equipment.

## Preventing Infection

One of the best ways to prevent infections is to clean your hands and remind others to clean theirs. Use hand sanitizer gel or wash with soap and water after using the bathroom, before eating, or after touching anything that may be soiled.

**Health care providers are required to wash or sanitize their hands before and after seeing a patient.** They should wear gloves when they perform tasks such as drawing blood, touching wounds or handling bodily fluids. Don't hesitate to remind your care team members to clean their hands or wear gloves.

**Make sure your visitors wash or sanitize their hands before and after seeing you. If they are sick, please ask them to stay home or to leave.**

Bacteria can spread in several ways, and in some instances, extra care to prevent the spread of infection is required. To help protect our patients, visitors, and our community, our staff may use gloves, masks, and gowns over their clothing. Visitors may be asked to do the same. A "Precaution" sign will be on the door if this protective equipment is necessary.

Medical equipment is cleaned between patients and each patient room undergoes a thorough disinfection and cleaning procedure between patients. Rooms and bathrooms are cleaned at least daily.

Marshall has invested in state-of-the-art UV light disinfection robots as an additional measure of safety. Along with our highly trained and dedicated Environmental Services staff, the five robots help keep microbes from living on environmental surfaces throughout the hospital.

If you have any questions regarding infection control and safety practices at Marshall, speak with your nurse or ask to speak with the Infection Control Nurse.

## Preventing Injury and Falls

During your stay, you may need help moving around. Whether it's getting out of bed, using the toilet, or walking, we are here to provide assistance. If at any time you feel you need help, please call for your nurse. To ensure a safe environment, we may use special equipment to transfer you safely or to aid in your care. If a mechanical lift or transfer aide is necessary, a staff member will explain this to you.



## Rapid Response: Getting Help Quickly

At Marshall, your voice matters. If you or a family member notices a serious or sudden change in your condition, you can request immediate help from our Rapid Response Team.

### When to call

- Trouble breathing or shortness of breath
- Chest pain or pressure
- Sudden confusion or difficulty waking up
- Any noticeable or unexpected change that concerns you
- Something just doesn't feel right

### How to call

- Dial 555 from your room phone and ask for a Rapid Response, be prepared to state your room and bed number;
- Or immediately notify your nurse.

### Why this matters

You know yourself or your loved one best. Calling a Rapid Response brings a specialized team quickly to assess the situation and provide urgent care if needed. Early action can prevent emergencies. We encourage patients and families to speak up—your concerns are taken seriously and help us provide safer care.



# Patient Safety Guide:

## Top 10 Ways to Stay Safe in the Hospital



1

**Call, Don't Fall** – Always use your call light before getting out of bed if you feel weak, dizzy, or unsure.



2

**Wear Your Non-Slip Socks** – Red or non-skid socks help prevent slipping.



3

**Keep Your Call Light Within Reach** – Ensure call button, phone, and personal items are nearby.



4

**Use Your Bed/Chair Alarm if Ordered** – Helps staff know when you need assistance.



5

**Know Your Care Team** – Ask staff to introduce themselves and explain their roles.



6

**Check Your Patient Identification Band for accuracy** – Staff should check your wristband before medications, tests, or treatments.



7

**Speak Up if Something Doesn't Feel Right** – Report any worsening symptoms, confusion, dizziness, or unsafe situations immediately.



8

**Keep Walkways Clear** – Avoid clutter around your bed such as bags, cords, or equipment.



9

**Ask Questions About Your Medications** – Know what you're taking, why you need it, and what side effects to watch for.



10

**Participate in Safety Checks** – Staff will round regularly to check pain, positioning, personal needs, and overall safety.

# Your Care & Treatment

## Daily Routine

Mornings and early evenings are a busy time, when special procedures are scheduled, doctors make patient rounds, and the housekeeping staff come to tidy up rooms.

Most patients require early morning “fasting” lab draws and many are weighed each day in the early hours before breakfast arrival.

Nursing staff will assess and monitor your condition, take your vital signs, review your test results, communicate with your physician, provide indicated treatments and medications, and coordinate your care with other disciplines.

Care requirements continue throughout the night and many patients are admitted during late night hours. We make every effort to keep the noise level to a minimum while continuing necessary care, treatment, and medication communication.

Physicians make patient rounds at least daily. The time of patient rounds depends on factors including patient condition, surgery schedule, office hours, and other emergencies. Keep a list of questions for your physician and if you don't understand something, don't hesitate to ask the physician to re-explain.

Special diagnostic tests may be needed during your stay. Some will occur in the morning and require special preparation, such as fasting the night before. Testing times will vary, and emergencies may need to take priority over a scheduled test. Results are provided directly to the physician, who will discuss the test results with you.



# Shhh...

## Silent Hospitals Help Healing

We want to provide the best healing environment for all of our patients. We ask that patients and visitors be aware of noise levels. To help with providing a quiet environment, lower voices, turn cell phones to silent, and lower the TV volume, or use earphones. Our aim is to keep noises to a minimum so that patients can get the rest they need to heal. Please let us know if there is anything we can do to make your stay more restful.

## Bedside Reports

To keep you better informed about your plan of care, tests, and progress, your care team will participate in bedside reports. During a shift change, your current nurse will introduce your new nurse and communicate any updates or changes to your condition. We encourage you to be an active participant during this exchange.

In the event that you have visitors in your room at the time of the bedside report—or anytime you feel uncomfortable about any information being discussed—please let your nurses know and other arrangements will be made. If you are sleeping at the change of shift report, the nurses will update the whiteboard information. The verbal report will be done elsewhere to permit your continued rest, unless you have asked to be awoken for the report.

Bedside reports will benefit you by keeping you better informed of your condition. It also allows us to continue to maintain the high quality of care that you expect as a patient at Marshall.



**You need to understand your care plan. Don't hesitate to ask questions as many times as you need to.**

## Hospitalists

During your stay, you may be seen by physicians on our medical staff who are board certified in internal medicine and are experts in the care of hospitalized patients. Our hospitalists work full-time in the hospital, focusing solely on admitted patients. This additional time and focus can make

a significant difference. Although you will likely speak with, and receive care from, more than one hospitalist during your stay, rest assured that they communicate closely with each other, the nursing staff, and ultimately with your regular physician as you become ready for discharge.

## Advance Directives

An Advance Health Care Directive (AHCD) is a legal document allowing you to designate a Health Care Agent to make your health care decisions when you are unable to. This is also known as “Durable Power of Attorney for Health Care” or “Medical Power of Attorney”. It provides instructions about your medical care and expresses your choices when facing life prolonging and end of life decisions and care.

### Why complete an AHCD?

An AHCD provides direction to family, friends, and health care providers when you are unable to do so. It identifies who you trust to make decisions for you and allows health care professionals to speak openly to them.

When thinking about your wishes towards the end of life consider the following:

- Who do you trust to make decisions based on your wishes? Who can you have honest and open conversations with about end of life decisions?
- Would you want Cardiopulmonary Resuscitation (CPR) if your heart stops?
- Would you want to be put on a breathing machine (ventilator) to help you breathe if you could no longer breathe on your own? If yes, for how long?
- If you can no longer swallow, eat foods/drink fluids by mouth would you be okay with being fed by a tube and for how long?
- Would you want to take medications to treat serious infections or prolong your life?
- Would you want to donate your organs and/or body upon death?

### What to do once you've completed your AHCD

- Give copies to your designated Health Care Agent(s) and/or family, your health care

provider(s), and hospitals. Keep originals with you and easily accessible.

- Review your completed AHCD periodically or as your health condition changes.

You can change your decisions at any time. Ensure that new copies are distributed.

### Where can you obtain AHCD forms or ask for assistance?

- Marshall
- Senior Legal Services at 937 Spring Street, Placerville
- Personal attorney

### Websites

- CA Hospital Association – [www.calhospital.org](http://www.calhospital.org)
- Coalition for Compassionate Care for California – [www.coalitionccc.org](http://www.coalitionccc.org)
- Five Wishes – [www.agingwithdignity.org](http://www.agingwithdignity.org)
- POLST California – [www.capolst.org](http://www.capolst.org)

## Blood Thinners – Anticoagulants and Antiplatelets

Anticoagulants and antiplatelets are medicines that reduce blood clotting in an artery, vein or the heart. It is important to let all your healthcare providers know if you are taking a blood thinner. Different blood thinners can interact with some of the food you eat and other medications you take.

### ANTICOAGULANTS include:

- Warfarin (Coumadin)
- Enoxaparin (Lovenox)
- Dabigatran (Pradaxa)
- Rivaroxaban (Xarelto)
- Apixaban (Eliquis)
- Edoxaban (Savaysa)

### ANTIPLATELETS include:

- Clopidogrel (Plavix)
- Aspirin
- Extended Release Dipyridamole/Aspirin (Aggrenox)
- Cilostazol (Pletal)
- Prasugrel (Effient)
- Ticagrelor (Brilinta)



**Serious bleeding is a rare side effect of blood thinners. Common side effects include:**

- Bruising
- Nosebleeds
- Bleeding from cuts that stops within 10 minutes
- Gums that bleed when brushing teeth

**Because blood thinners may cause serious bleeding, it is important to know when to seek medical attention as you transition out of the hospital. Go to the emergency room if you:**

- Throw up blood or have vomit that looks like coffee grounds
- Have bleeding that will not stop
- Fall and hit your head
- Cough up blood
- Have pink or reddish-brown urine
- Have red or black stools that look like tar
- Have unusual headaches, dizziness, or weakness
- Are a female and have a heavier than normal menstrual cycle

It is important you take these medications as directed and to complete any laboratory testing that may be needed as part of your anticoagulation therapy.

## Speak Up!

Speak Up is a collaborative effort between Marshall and the Joint Commission, a nonprofit organization that accredits and certifies healthcare organizations, to encourage you to help us prevent medical errors in the delivery of your care.

### **S**PEAK UP

if you have any questions. If you don't understand, ask again.

### **P**AY ATTENTION

to the care you are receiving. Always make sure you are getting the right treatments and medicines. Don't assume anything.

### **E**DUCATE

yourself so you fully understand your diagnosis and treatment.

### **A**SK

a trusted family member or friend to be your advocate ("health care partner").

### **K**NOW

what medicines you take and why you take them. Medication errors are among the most common health care mistake.

### **U**SE

an accredited health care facility, like Marshall, which has completed a rigorous survey to ensure safety and quality.

### **P**ARTICIPATE

in all decisions about your treatment plan. You are the center of the health care team.

**For more information on this initiative, please scan this QR code.**



## About Antibiotics

Antibiotics are medicines that treat or prevent infections caused by bacteria. Antibiotics are not effective in treating viral illnesses. Your healthcare team may start you on antibiotics if they think you might have an infection caused by bacteria. You may also need an antibiotic to prevent an infection after you have surgery or if your immune system doesn't work well. Some things your health care team thinks about before prescribing an antibiotic include:

- Type of infection
- Type of bacteria
- How well your liver and kidneys work
- Other medications you are taking
- Any antibiotic allergies you may have
- Potential side effects

Talk with your health care team to find out why you are receiving antibiotics and how you should take them.



Always ask about any medicine you don't recognize before you take it.

## Pain Management

We want to make you as comfortable as possible and reduce any pain you may have during your hospital stay. By managing your pain, you'll increase your comfort and promote healing. With less pain, you can increase your activity and strength.

Pain can be managed by a variety of methods, which may include oral medication, adhesive skin patches, injection into an arm, leg, or vein. Pain medication may be given on a continuous, scheduled or as-needed basis.

You may discuss with your physician, nurse or pharmacist which method is best for you.

What you  
**SHARE**  
elevates  
**OUR CARE.**

Your feedback helps us  
improve care for every  
patient. Every time.

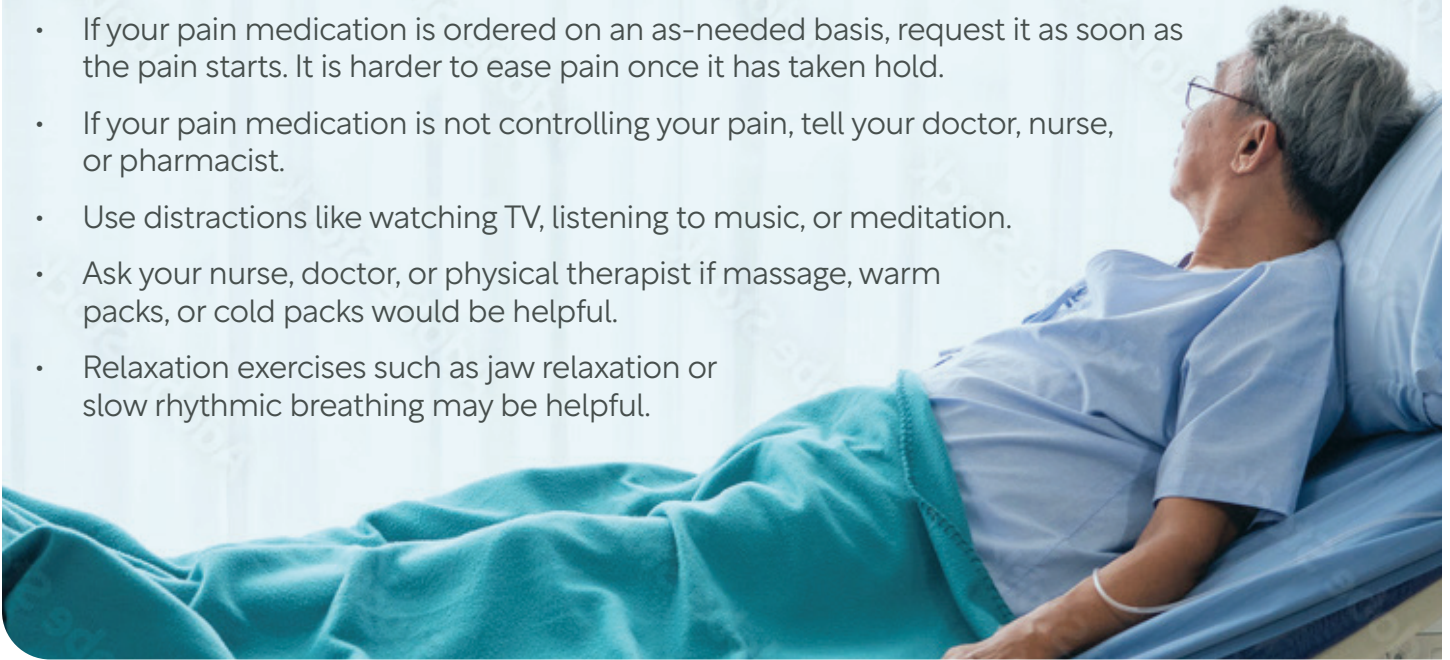
**How are we doing? Your voice matters.**

Please tell us now, and watch for a very important survey from Marshall and Press Ganey, and help us elevate the Marshall Patient Care Experience.



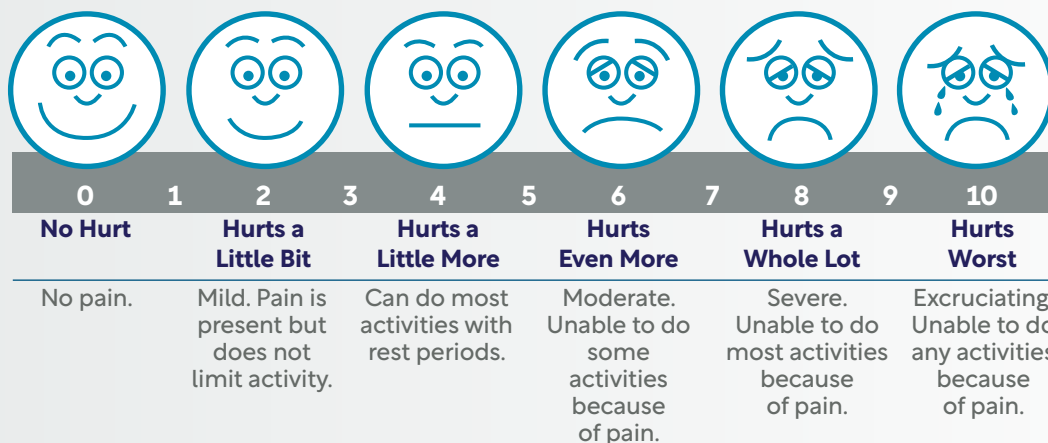
## Things you can do to manage your pain

- Ask your doctor, nurse, or pharmacist what to expect from your illness, injury or surgery and what to expect from hospitalization.
- Discuss your pain control plan with your doctors, nurses, and pharmacist. Tell the doctor what medication has worked well or not so well in the past.
- If your pain medication is ordered on an as-needed basis, request it as soon as the pain starts. It is harder to ease pain once it has taken hold.
- If your pain medication is not controlling your pain, tell your doctor, nurse, or pharmacist.
- Use distractions like watching TV, listening to music, or meditation.
- Ask your nurse, doctor, or physical therapist if massage, warm packs, or cold packs would be helpful.
- Relaxation exercises such as jaw relaxation or slow rhythmic breathing may be helpful.



### Pain Rating Scale

- You may be asked to rate your pain on a scale of 0 - 10, or you may choose words that best describe the pain.
- You may also set a pain control goal (such as having no pain that's above 3 on the scale).
- Reporting your pain as a number helps the doctors and nurses know how well your treatment is working and whether to make any changes.



## Managing Pain with Opioids

Prescription opioids can be used to help relieve moderate-to-severe pain and are often prescribed following a surgery or injury, or for certain health conditions. These medications can be an important part of treatment but also come with serious risks. Opioids can make you drowsy, dizzy and more likely to fall. When taking high doses and in combination with alcohol or certain prescription medications, opioids can slow breathing or even make you stop breathing. Opioids have a risk for addiction, especially with prolonged use. This is why your doctor will balance your dose so you are able to perform daily activities but may not reduce your pain to zero.

As you transition home, some medications should be avoided with opioids unless specifically advised by your doctor. This includes alcohol, benzodiazepines, (such as Xanax or Valium), muscle relaxants (such as Soma or Flexeril), and hypnotics (such as Ambien or Lunesta). If you take these medications or drink alcohol with opioids, you increase your risk for falls, oversedation, and even fatal overdose. Talk to your health care provider about ways to manage your pain that don't involve prescription opioids. Some of these options may actually work better and have fewer risks and side effects. Options may include:

- Pain relievers such as acetaminophen, ibuprofen, and naproxen
- Some medications that are also used for depression or seizures
- Physical therapy and exercise
- Cognitive behavioral therapy, a psychological, goal-directed approach, in which patients learn how to modify physical, behavioral, and emotional triggers of pain and stress

15

If you're not sure about your care instructions or when to take your medicines at home, ask your nurse to review them with you again. Be sure to write down the information.

## Advanced Illness Management

If you have a serious illness or complicated chronic medical condition, you may benefit from the Advanced Illness Management (AIM) program we offer to our hospital patients. AIM, which is palliative care, is not the same as end-of-life hospice care. AIM is for anyone suffering from a serious or chronic illness requiring management of multiple symptoms, including pain and emotional needs. It often goes hand in hand with aggressive curative treatment.

Our AIM team is made up of specialists in this type of care, including doctors, nurses, social workers, and pastoral care. If you are struggling with a complex illness and feel this program may be of benefit to you, you are entitled to request a team consultation while in our care. Talk with your nurse or hospital physician as soon as possible so that we can begin providing advanced, compassionate care suitable to your needs.



## Patient Responsibilities

Healing involves cooperation between patient and caregiver. It's a partnership where we ask for your active participation in:

- Providing accurate and complete information about present symptoms, past illnesses, hospitalizations, medications, and other health matters
- Reporting unexpected changes in your condition to those giving you care and letting us know if you don't understand your treatment
- Following the treatment plan your physician recommends, including instructions of nurses and other professionals carrying out your physician's orders
- Learning as much as possible about your condition, your medications, and your care needs following your discharge from the hospital
- Meeting the financial obligations of your care as promptly as possible
- Being considerate of the rights and property of other patients and hospital employees
- Asking questions whenever you are unclear about any aspect of your care
- Accepting the consequences for decisions in which you have participated



### If You Have Concerns

Our staff strives to provide you with quality care and service. However, there may be an occasion to voice a concern. The first step is to request to speak to a Charge Nurse or the Department Director. You may also contact the Patient Advocates at 530-344-5428 for assistance.

Patients are prohibited from possessing illegal or dangerous items such as alcohol, weapons, or drugs (other than those prescribed by a health provider). In order to promote the healing and safety of Marshall patients, as well as the safety of employees and the community, if a Marshall employee suspects that a patient may be in possession of any illegal or dangerous item, the patient agrees to allow a Marshall employee to search his or her person or belongings.

### Bioethics Committee

If you need assistance understanding or resolving a healthcare dilemma, the Bioethics Committee can help. Call the Patient Advocate at 530-344-5428 for assistance.



# Preparing to Leave the Hospital

**On the day of discharge:** Discharge time from your room is 1 p.m. unless otherwise noted by your physician and/or case manager. Please arrange to have family or friends available to transport you to your home on your anticipated day of discharge.

A case manager will work with you, your family, and your physician to coordinate any services you might need during your hospitalization and after discharge. Your preference for a provider of after hospital services will be honored depending on availability. All services are dictated by your insurance coverage guidelines.

If you will need nursing care, therapy, or personal assistance at home, your physician will refer you to the appropriate service.

Patients with financial obligations will be contacted by the Financial Coordinator to secure payment before discharge. Any questions can be directed to 530-626-2770 x2991.

## Discharge/Your Return Home

When you are ready to leave the hospital, different types of discharge may occur.

If you are going home, we will provide you information regarding follow-up care, medications to take and not take, activity limitations, diet and food restrictions, and all other instructions you need to know. If you identify as homeless, additional information and resources will be provided by MMC in accordance with SB1152.

If you are being discharged to a skilled nursing facility for rehabilitation or post-acute care, that facility will handle your care and instructions once you arrive. Ideally, your stay at a skilled nursing facility will be brief, because the best place to fully recover is at home. If additional rehabilitation is needed and you do go to such a facility, the goal will be to get you strong enough to return home as quickly as possible to complete your recovery. Additional home-based resources and home care are typically available once you leave the hospital or skilled nursing facility and these options may make it possible to leave the skilled nursing facility sooner than you may have thought.

If you are going home with hospice care, your care will be coordinated by the hospice of your choice.

## Checklist for Discharge



Make sure you have the following information before you leave the hospital.

- **Medicine list** – Includes all your new and former prescriptions, over-the-counter medicines, and vitamins. Ask if there are any medicines you can stop taking or that are not good to take together. Also make sure you know why, how and when to take each one.
- **Prescriptions** – Check that your pharmacy has your new prescriptions and that you have a plan in place to get them filled, and a plan for storage and disposal.
- **Discharge instructions** – Beyond medicine, this can include:
  - Foods or activities to avoid
  - Follow-up tests/appointments
  - How to care for incisions or use equipment
  - Warning signs to watch for
  - Daily living adjustments (like how to get into bed)
  - Who to call with questions
- **After-hospital services** – Know how much support you'll need with:
  - **Personal care:** bathing, eating, dressing, toileting
  - **Home care:** cooking, cleaning, laundry, shopping
  - **Healthcare:** taking medicines, follow-up appointments, physical therapy, wound care, injections, medical equipment.
- **Local resources** – Ask your discharge planner for help finding local after-care services or other support groups.
- **Medical records** – To request a copy of your medical records, call 530-626-2620.

### Try the teach-back method.

Repeat back what you hear the discharge planner say to make sure you understand the details correctly.

# Billing Information

## Insurance Billing

We want to make it as simple as possible for you to manage the costs of services. By discussing the expenses in advance with your doctor, your insurer, and the hospital, you will be better able to manage and understand your medical bills.

The Billing Department will bill your insurance company or companies. Please respond as quickly as possible to requests for information from Marshall or your insurance company. If you think you will need assistance with your hospital bill or if you need an itemized bill, call the financial counselors at 530-626-2618.

## Marshall Discount Payment and Charity Care Policies

In accordance with California Health and Safety Code Sections 127400 et seq., Marshall

discounts payment or provides charity care to financially qualified patients. Patients who qualify for these discounts or charity care under our policies include patients who meet both of the following qualifications:

- The patient either is a self-pay patient, is under-insured, or has high medical costs, as described in our discount payment and charity care policies; AND
- The patient has a family income (as described in the policies) that does not exceed 450% of the federal policy level.

To receive a copy of our discount payment and charity care policies or to apply for discounted payment or charity care, please contact our customer service representatives at 530-626-2618.



## Frequently Asked Questions about Insurance

### *Is this care a covered service under my insurance policy?*

Your insurance policy information should outline what services are covered. If you have any questions, please call the customer service number on your insurance card.

### *Have I met my deductible?*

Please call the customer service number on your insurance card. They can provide detailed information regarding your copayments and/or deductibles.

### *Is pre-authorization required from my insurance company?*

Your doctor may be required to obtain a pre-authorization from your insurance company prior to you receiving care at Marshall. It is important that you check your insurance policy or contact your insurance provider to verify. If a pre-authorization is

required, ensure that you inform your doctor. If one is required and your doctor did not obtain one, you may have to pay for any care you receive at Marshall.

### *Is this an emergency condition?*

If you come to our emergency room, you are entitled, by law, to receive an emergency medical screening exam, regardless of your insurance or your ability to pay. Your insurance must pay for the exam, as long as a prudent person would have believed an emergency existed.

### *Is Marshall a covered provider under my insurance?*

Please contact your insurance company to verify whether or not care provided at Marshall is covered. In many cases, insurance companies offer an online provider directory that you can search.

### *Can I still get my care at Marshall, even if my insurance may not cover the services?*

Yes, we welcome the opportunity to provide you with excellent healthcare, regardless of your insurance. You should be aware that you may have to pay for the services you receive when not covered by your insurance.

## Marshall vs. Doctor's Services

The care you receive at Marshall includes facility services, provided by Marshall, and may also include professional services, provided by doctors with whom Marshall contracts for their services. The doctors' services are separate from Marshall and you will be billed separately.

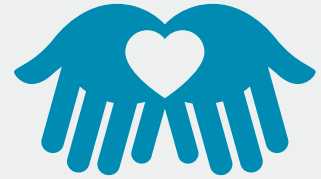
Doctor's services provided within Marshall may include some of the following:

- Diagnosing, evaluating and managing your health care needs, including emergency conditions
- Ordering and reviewing your diagnostic tests
- Reading and diagnosing your x-ray, CAT scan, or MRI
- Reviewing and diagnosing your laboratory and pathology samples
- Supervising the administration of anesthesia
- Performing surgical and specialized procedures
- Telehealth services

Some of the doctor groups that provide care at Marshall are the Marshall Medical Foundation, USAcute Care Solutions, Placerville Radiology Medical Group, El Dorado Pathology Medical Group, VeeMed, and El Dorado Anesthesia Medical Group.



## Give to Marshall Foundation



### Marshall Foundation for Community Health

Marshall is committed to quality in every aspect of your care. Many of our patients seek ways to show their appreciation for the caring kindness received. Since 1974, Marshall Foundation for Community Health has assisted grateful patients in benefiting "programs that care for people." The sole purpose of the Foundation is to help keep the community healthier by providing a resource for donors to accomplish their dreams through philanthropy. Charitable contributions help ensure quality healthcare will continue to be available here in our community. You may wish to consider a gift for a specific purpose or to honor a loved one. For more information, call 530-642-9984.

### Marshall Golden Club

We take a special interest in the seniors of our community. The Marshall Golden Club is a free service for seniors sponsored by Marshall Foundation for Community Health. Members have access to the following services:

- Free assistance with Medicare and other insurance paperwork
- Low-cost glucose and cholesterol screenings by appointment through Marshall's Diabetes & Nutrition Education department in Cameron Park
- Free notary services
- 20% discount on meals in the hospital cafeteria at any time
- Free meals in your room for a spouse who visits you while you are in the hospital
- Estate preservation and planned giving seminars

**For more information, call 530-642-9984.**

# Patient Rights

Marshall Hospital board of directors, medical staff and employees are committed to assuring that all patients seeking care at our hospital are informed of and supported in exercising all rights without regard to sex, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, gender identity/expression, disability, medical condition, marital status, age, registered domestic partner status, genetic information, citizenship, primary language, immigration status (except required by federal laws) or source of payment for care.

## You have the right to:

1. Considerate and respectful care, and to be made comfortable. You have the right to respect for your cultural, psychosocial, spiritual, and personal values, beliefs and preferences.
2. Have a family member (or other representative of your choosing) and your own physician notified promptly of your admission to the hospital.
3. Know the name of the licensed health care practitioner acting within the scope of his or her professional licensure who has primary responsibility for coordinating your care, and the names and professional relationships of physicians and non-physicians who will see you.
4. Receive information about your health status, diagnosis, prognosis, course of treatment, prospects for recovery and outcomes of care (including unanticipated outcomes) in terms you can understand. You have the right to access your medical records. You have the right to effective communication and to participate in the development and implementation of your plan of care. You have the right to participate in ethical questions that arise in the course of your care, including issues of conflict resolution, withholding resuscitative services, and forgoing or withdrawing life-sustaining treatment
5. Make decisions regarding medical care, and receive as much information about any proposed treatment or procedure as you may need in order to give informed consent or to refuse a course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved, alternate courses of treatment or non-treatment and the risks involved in each, and the name of the person who will carry out the procedure or treatment.
6. Request or refuse treatment, to the extent permitted by law. However, you do not have the right to demand inappropriate or medically unnecessary treatment or services. You have the right to leave the hospital even against the advice of members of the medical staff, to the extent permitted by law.
7. Be advised if the hospital/licensed health care practitioner acting within the scope of his or her professional licensure proposes to engage in or perform human experimentation affecting your care or treatment. You have the right to refuse to participate in such research projects.
8. Reasonable responses to any reasonable requests made for service.
9. Appropriate assessment and management of your pain, information about pain, pain relief measures and to participate in pain management decisions. You may request or reject the use of any or all modalities to relieve pain, including opiate medication, if you suffer from severe chronic intractable pain. The doctor may refuse to prescribe the opiate medication, but if so, must inform you that there are physicians who specialize in the treatment of pain with methods that include the use of opiates.
10. Formulate advance directives. This includes designating a decision maker if you become incapable of understanding a proposed treatment or become unable to communicate your wishes regarding care. Hospital staff and practitioners who provide care in the hospital shall comply with these directives. All patients' rights apply to the person who has legal responsibility to make decisions regarding medical care on your behalf.
11. Have personal privacy respected. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. You have the right to be told the reason for the presence of any

*(continued)*

# Patient Rights

individual. You have the right to have visitors leave prior to an examination and when treatment issues are being discussed. Privacy curtains will be used in semi-private rooms.

12. Confidential treatment of all communications and records pertaining to your care and stay in the hospital. You will receive a separate “Notice of Privacy Practices” that explains your privacy rights in detail and how we may use and disclose your protected health information.
13. Receive care in a safe setting, free from mental, physical, sexual or verbal abuse and neglect, exploitation or harassment. You have the right to access protective and advocacy services including notifying government agencies of neglect or abuse.
14. Be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff.
15. Reasonable continuity of care and to know in advance the time and location of appointments as well as the identity of the persons providing the care.
16. Be informed by the physician, or a delegate of the physician, of continuing health care requirements and options following discharge from the hospital. You have the right to be involved in the development and implementation of your discharge plan. Upon your request, a friend or family member may be provided this information also.
17. Know which hospital rules and policies apply to your conduct while a patient.
18. Designate a support person as well as visitors of your choosing, if you have decision-making capacity, whether or not the visitor is related by blood, marriage, or registered domestic partner status, unless:
  - No visitors are allowed.
  - The facility reasonably determines that the presence of a particular visitor would endanger the health or safety of a patient, a member of the health facility staff, or other visitor to the health facility, or would significantly disrupt the operations of the facility.
- You have told the health facility staff that you no longer want a particular person to visit.
- However, a health facility may establish reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors. The health facility must inform you (or your support person, where appropriate) of your visitation rights, including any clinical restrictions or limitations. The health facility is not permitted to restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.
19. Have your wishes considered, if you lack decision-making capacity, for the purposes of determining who may visit. The method of that consideration will comply with federal law and be disclosed in the hospital policy on visitation. At a minimum, the hospital shall include any persons living in your household and any support person pursuant to federal law.
20. Examine and receive an explanation of the hospital’s bill regardless of the source of payment. Exercise these rights without regard to, and be free of discrimination on the basis of economic status, educational background, race, color, religion, ancestry, national origin, sex, gender, sexual orientation, gender identity/ expression, disability, medical condition, marital status, age, registered domestic partner status, genetic information, citizenship, primary language, immigration status (except as required by federal law) or the source of payment for care.
21. If you believe that these rights have been denied to you, you may file a grievance with this hospital (see #22 below) or you can file a grievance with the Office for Civil Rights, by writing or calling:

U. S. Department of Health & Human Services  
Office for Civil Rights - Region IX  
90 7th Street, Suite 4-10  
San Francisco, CA 94103 800-368-1019  
800-537-7697 TDD

*(continued)*

## Patient Rights

22. File a grievance. If you want to file a grievance with this hospital, you may do so by writing or by calling:

Patient Advocate Office  
1100 Marshall Way  
Placerville, CA 95667  
530-344-5428.

The grievance committee will review each grievance and provide you with a written response within 45 days. For grievances regarding billing issues or care provider behavior we will respond with a resolution within 30 days. The written response will contain the name of a person to contact at the hospital, the steps taken to investigate the grievance and the final determination. Concerns regarding quality of care or premature discharge may also be referred to the appropriate Utilization and Quality Control Peer Review Organization (PRO).

23. File a complaint with the California Department of Public Health regardless of whether you use the hospital's grievance process. The California Department of Public Health's phone number and address is:

California Department of Public Health  
Licensing and Certification  
3901 Lennane Drive, Suite 210  
Sacramento, CA 95815  
916-263-5800

24. File a complaint with the Civil Rights Department at [www.calcivilrights.ca.gov](http://www.calcivilrights.ca.gov), (800) 884-1684 or (800) 700-2320 (TTY) or 2218 Kausen Dr. #100, Elk Grove, CA 95758.

25. File a complaint with the Medical Board of California at [www.mbc.ca.gov/consumers/complaints](http://www.mbc.ca.gov/consumers/complaints). (800) 633-2322 or 2005 Evergreen St., #1200, Sacramento, CA 95815.

26. Patients and members of our community are encouraged to share concerns with Marshall Administration at (530) 626-2838. If concerns are not resolved, the patient or community member may also contact the Joint Commission's Office of Quality Monitoring at (800) 994-6610, submit a complaint online at:

<https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-concern-or-complaint/>, or in writing to:

Office of Quality and Patient Safety  
The Joint Commission  
One Renaissance Boulevard  
Oakbrook Terrace, IL 60181.

### Patient Responsibilities:

Healing involves cooperation between patient and caregiver. It's a partnership where we ask for your active participation in:

- Providing accurate and complete information about present symptoms, past illnesses, hospitalizations, medications, and other health matters
- Reporting unexpected changes in your condition to those giving you care and letting us know if you don't understand your treatment
- Following the treatment plan your physician recommends, including instructions of nurses and other professionals carrying out your physician's orders
- Learning as much as possible about your condition, your medications, and your care needs following your discharge from the hospital
- Meeting the financial obligations of your care as promptly as possible
- Being considerate of the rights and property of other patients and hospital employees
- Asking questions whenever you are unclear about any aspect of your care
- Accepting the consequences for decisions in which you have participated

*This Patient Rights document incorporates the requirements of The Joint Commission; Title 22, California Code of Regulations, Section 70707; Health and Safety Code Sections 1262.6, 1288.4, and 124960; 42 C.F.R. Section 482.13 (Medicare Conditions of Participation); and Section 1557 of the Affordable Care Act (42 U.S.C. 18116, 45 C.F.R. Part 92). (2/23)*

# Notes

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Founded in 1959, Marshall is an independent, nonprofit community healthcare provider located in the heart of the Sierra Foothills between Sacramento and South Lake Tahoe. Marshall includes Marshall Hospital, a fully accredited acute care facility with 111 beds located in Placerville; several outpatient facilities in Cameron Park, El Dorado Hills, Placerville and Georgetown; and many community health and education programs. Marshall has over 220 board-certified providers and a team of over 1,400 employees providing quality healthcare services to more than 180,000 residents of El Dorado County.



1100 Marshall Way  
Placerville, California 95667  
530-622-1441  
916-933-CARE (2273)  
Toll-free 866-340-1441

**MARSHALLMEDICAL.ORG**

