

# **Your Stroke Care Binder**

## **Information about Hamilton Health Sciences**

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### **Visiting**

Current visiting hours – 11:00 am to 8:00 pm.

Two visitors at a time. Visit only if you are feeling well and wash your hands when you arrive at the hospital.

### **Parking**

#### **Hamilton General Hospital - 7 South**

237 Barton Street East

Hamilton, Ontario

L8L 2X2

905-527-4322

- Victoria Street Parking Ramp is off Victoria Avenue on the left just past the hospital. There is a bridge-walkway to the hospital located on Level F. The parking ramp elevator is not available on Level H or J.
-

- Municipal parking lot is off Victoria Avenue across from the hospital.
- Meter parking on streets is close by but can be limited. You may get a parking ticket if your time runs out.
- Wheelchair accessible parking: on Level B of the Victoria Avenue Parking Ramp on Level B. There is an outdoor walkway from Level B to the hospital.

**Hamilton General Hospital**  
**- Regional Rehabilitation Centre**  
300 Wellington Street North  
Hamilton, Ontario  
L8L 0A4

There is limited parking available at the Regional Rehabilitation Centre. You may also park across the street at the Wellington Lot.

**St. Peter's Hospital**  
88 Maplewood Avenue  
Hamilton, Ontario  
L8M 1W9  
905-777-3837

There is a parking lot at the back of the hospital. You can only use toonies and loonies as payment in the machine.

## **Fragrance restricted**

We are a fragrance restricted hospital. Please do not wear or bring perfume, cologne, aftershave, scented hair spray scented soaps, deodorants, aerosols or other scented products.

## **We are latex-free**

Out of consideration for the health of our patients and staff with latex allergies, please do not bring latex balloons or other unauthorized latex products into the hospital.

## **Television, radio, telephones**

- Televisions may be rented in most patient rooms.
- Telephones may be rented for a flat rate.
- You may bring in a small battery operated radio, iPod or CD player with earphones.

**The hospital is not responsible for lost articles.**

## **Cellphones and wireless devices**

Do not use cellphones or wireless devices in patient care areas at the Hamilton General Hospital. They can be used in the lobby, cafeteria, public hallways and business offices.

## **Discharge**

Your health care team will begin to plan for your discharge with you and your family when you arrive. Please plan to leave as early as 9:00 am on your day of discharge.

## **We are a teaching hospital**

Students may become involved in your care. If you would prefer not to have students involved in your care, please let a staff member know.

## **Smoke-free hospital**

Hamilton Health Sciences is smoke-free as of January 1, 2011. This means that smoking is no longer allowed anywhere on the grounds, including parking lots, garages and vehicles.

For support or help to stay smoke-free:

- talk to a member of your health care team at Hamilton Health Sciences
- contact Smokers' Helpline toll free at 1-877-513-5333 or [www.smokershelpline.ca](http://www.smokershelpline.ca)

## **Prevent the spread of infections**

Infections can spread easily. Prevent the spread by:

- Delaying visiting if you do not feel well.
- Washing your hands before and after visiting. Hand cleanser is located outside each room and by the elevator.
- Not using the patient's washroom. Public washrooms are located on each floor.
- Following the directions about infection control if posted on the patient's room door. You may be asked to wear a gown, gloves or mask when visiting.
- Calling a nurse if you see a patient needing help rather than helping a patient yourself.

## **Information and giving consent for your care**

Helping you understand your care is important to us.

You have the right to refuse any care that makes you feel unsure or uncomfortable.

Please ask us questions whenever you are unclear about your care and why it is beneficial to your recovery.

## **Taking part in research**

Hamilton Health Sciences is a teaching hospital and does research to help make sure our patients get the best quality of care. You may be asked to take part in stroke research projects. You do not have to take part if you do not want to and saying no will not affect your care.

## **Your Health Care – Be Involved**

Hamilton Health Sciences takes part in the Ontario Hospital Association's program, "Your Health Care – Be Involved". The program provides 5 tips to encourage patients to be more involved in their health care:

1. Be involved in your healthcare. Speak up if you have questions or concerns about your care.

2. Tell a member of your healthcare team about your past illnesses and your current health condition.
3. Bring all of your medicines with you when you go to the hospital or to a medical appointment.
4. Tell a member of your health care team if you have ever had an allergic or bad reaction to any medicine or food.
5. Make sure you know what to do when you go home from hospital or from your medical appointment.

For more information, ask a member of the healthcare team for a copy of “Your Health Care – Be Involved”. You can also print a copy at the Ontario Hospital Association’s website [www.oha.ca](http://www.oha.ca). It is available in many languages.

## **Compliments and concerns**

Every staff member at Hamilton Health Sciences is part of a health care team dedicated to helping you with your care and treatment. If you wish to express your compliments or concerns, please call Patient Relations at 905-521-2100, ext. 75240.

## Payment

The Hamilton Health Sciences is able to provide you with products and services which you may need. You will be asked to pay for:

- all procedures, products and services not covered by OHIP or other provincial insurance
- elective procedures not covered by OHIP; your doctor will provide you with an estimated cost of the procedure or service.

You will be given a bill to let you know if these charges apply to you and will be asked to sign a form.

Payment may be made by cheque or credit card at the Cashier Office in the Main Lobby during regular business hours. You will be given a receipt after payment.

You may also pay your hospital bill on-line directly from the hospital website at [www.hhsc.ca](http://www.hhsc.ca). Select the tab Patient Accounts on the left hand side of the screen. This service is convenient, fast and secure.

The extra cost of a private or semi-private room is not covered by OHIP and is your responsibility. Check your insurance plan or contact your employer to see if the cost is covered.



## **Additional information**

For more information, please go to our website:

[www.hhsc.ca/](http://www.hhsc.ca/)

# Your Stroke Care

## What is a stroke?

A stroke is a sudden loss of brain function. It is caused by the blockage of the flow of blood to the brain or the rupture of blood vessels in the brain. The effects of the stroke depend on where the brain was injured and how much of the brain is damaged.

A stroke can be frightening for you and your family. You will have new experiences in the hospital and you may have questions. This booklet will help answer some of your questions about your care and help you get to know your health care team.

Any member of the health care team will be pleased to answer your questions at any time - no question is too simple to ask.

## Stroke care at Hamilton Health Sciences

We provide care after a stroke in many places at Hamilton Health Sciences. Your care will start on 7 South at the Hamilton General Hospital. On 7 South you will be assessed by a team of stroke care professionals. Your care will be personalized according to your needs.

You will receive the best care at the right place at Hamilton Health Sciences.

You may continue your rehabilitation on one of three locations:

- 7 South
- Ward B2 North in the Regional Rehabilitation building at the Hamilton General Hospital
- The Restorative Care Unit at St. Peter's Hospital

All areas work together to provide personalized recovery care.

# The Health Care Team

Members of the health care team will teach you and your family about:

- what has happened
- what treatment and care is needed
- what medications you are taking and how they help in your recovery
- what to expect when you leave the hospital
- your risk factors for stroke and what you can do to manage them

See the listing below of the health care team members you may meet and how they can help you.

<b>Health Care team member</b>	<b>How they help</b>
<b>Neurologist Internist</b>	<ul style="list-style-type: none"><li>• organize your medical care</li></ul>
<b>Neuropsychologist</b>	<ul style="list-style-type: none"><li>• assesses and treats changes in thinking and emotions common after stroke</li></ul>

<b>Health Care team member</b>	<b>How they help</b>
<b>Physiatrist</b>	<ul style="list-style-type: none"><li>• medical doctor that guides rehabilitation</li></ul>
<b>Registered Nurse and Registered Practical Nurse</b>	<ul style="list-style-type: none"><li>• helps you with your daily care</li><li>• answers your questions and concerns</li></ul>
<b>Dietitian/ Dietetic Assistant</b>	<ul style="list-style-type: none"><li>• helps you meet your nutritional needs</li><li>• ensures you receive the foods that are best for you</li></ul>
<b>Occupational Therapist/ Occupational Therapy Assistant</b>	<ul style="list-style-type: none"><li>• helps you to be more independent with your daily activities</li><li>• teaches you to use special equipment which allows you to do more for yourself</li></ul>
<b>Physiotherapist/ Physiotherapist Assistant</b>	<ul style="list-style-type: none"><li>• helps you to gradually increase your physical activity</li><li>• helps you to improve your strength, flexibility and balance</li></ul>
<b>Pharmacist</b>	<ul style="list-style-type: none"><li>• assesses your medications and dosages</li><li>• answers your questions about medications</li></ul>

<b>Health Care team member</b>	<b>How they help</b>
<b>Social Worker</b>	<ul style="list-style-type: none"><li>• helps you and your family learn ways of coping with the changes in your lives</li></ul>
<b>Speech-Language Pathologist, Communications Disorder Assistant</b>	<ul style="list-style-type: none"><li>• helps you with your spoken and written communication</li><li>• assesses and makes recommendations for managing swallowing problems</li></ul>
<b>Respiratory Therapist</b>	<ul style="list-style-type: none"><li>• provides breathing assessments, oxygen therapy and treatment to help reduce respiratory infections</li></ul>
<b>Chaplain</b>	<ul style="list-style-type: none"><li>• provides spiritual guidance and support</li></ul>
<b>Therapeutic Recreation Therapist</b>	<ul style="list-style-type: none"><li>• helps you with your leisure needs and goals</li></ul>
<b>Stroke Navigator</b>	<ul style="list-style-type: none"><li>• determines what type of recovery care is best for each patient</li><li>• provides education and support when you move between the areas of stroke care at Hamilton Health Sciences</li></ul>

# **Welcome to 7 South Hamilton General Hospital**

## **Visiting on 7 South**

Families and friends may visit the unit. Visiting hours are between 11:00 a.m. to 8:00 p.m. daily. Talk to a member of your health care team if you need to come in at a different time. Rest is an important part of recovery. Please delay visiting if you find a patient resting.

If needed, visiting hours on the unit may be restricted.

## **How do I contact 7 South?**

A family member can call 7 South for information to pass on to family and friends.

The number to call is: 905-527-4322, ext. 46700

## **What can I expect the first week on 7 South?**

When you are admitted to 7 South, the doctor will order a number of tests to determine:

- the type of stroke you have had
- the location of the stroke in your brain and,
- your risk factors for stroke.

See pages 20 and 21 for more information about these tests.

The health care team will assess the effects of your stroke and determine the treatment you need to help you learn how to do things that you did before the stroke. This is called rehabilitation and it will start on 7 South. Rehabilitation is an important part of your recovery and it will be based on your personal needs.

During rehabilitation you will work on many things such as:

- getting in and out of bed safely
- walking or moving around
- talking
- thinking
- eating
- bathing
- dressing



Rehabilitation cannot cure the damage caused to the brain by the stroke but can help you to re-learn how to do the things you did before the stroke.

Taking part in your treatment is an important part of your recovery.

While you are on 7 South:

- You will be closely watched by the health care team.
- The health care team will do physical and medical assessments.
- Tests such as a CT/MRI scan, ECG, Holter monitor and blood work may be ordered by the doctor.
- Nursing staff will:
  - monitor your bowel and bladder function.
  - check your blood sugars.
- The pharmacist will review the medications you take at home and in the hospital.
- The physiotherapist and occupational therapist will assess your level of activity and cognitive abilities.
- The speech language therapist will assess you for swallowing and communication abilities.
- The dietitian will help you meet your nutritional needs.

- The social worker will meet with you and your family to address concerns, discuss the stroke program and book your family meeting.
- All health care professionals will begin planning your discharge with you and your family during this time.
- Family members can bring in hearing aids, glasses, dentures and personal care items.

### **As you progress on 7 South:**

- The health care team will work with you and your family daily.
- A family meeting will be held to discuss the results of your assessment including the type of stroke, your deficits and the next level of care you need.

### **Your family meeting:**

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

- After you have had your family meeting, you will move to the next location of care that is based on your personal needs.

## **Other information about 7 South**

### **Meals**

Meals are served at approximately 8:00 am, 12:00 noon, and 5:00 pm.

### **Laundry**

Bedding will be changed as needed. Personal clothing will need to be washed at home.

### **Services available at the Hamilton General Hospital**

- a number of vending machines throughout the hospital
- the Market Place Cafeteria on the 1<sup>st</sup> level
- a coffee shop on the main level of the hospital
- a gift shop on the main level
- a chapel on the main level

## **We understand...**

This may be a stressful time for you. We recognize that your family or significant others are an important part of your care. The health care team will work with you in a respectful and caring manner. It is important that you and your family act in a respectful manner to the health care team providing your care.

## Tests you may have on 7 South

<b>Type of test</b>	<b>Purpose of test</b>	<b>How the test is done</b>
Blood Tests	Done to learn if there is anything in your blood to test for any abnormalities.	Blood is taken from your arm and studied in the lab.
Carotid Doppler	Helps with recognizing if there is a plaque build up narrowing your arteries and effecting blood flow.	Uses ultrasound (non harmful sound waves) to listen to the flow of your blood through your arteries.
ECG (electrocardiogram)	Records the electrical activity if the heart.	Sticky pads are placed on your body and these pads have sensors, which detects the electrical activity of your heart. The information is printed out.
Holter monitor	Used to look at abnormal heart rhythms.	It is a portable ECG and monitors your heart rhythm for a longer period of time. The monitor is worn on your body.
Echocardiogram	Determine if there is a heart condition and detects if blood clots are forming in your heart	Uses non-harmful sound waves to create a picture of your heart
CT Scan (CAT, computerized tomography)	Done to identify conditions in the brain.	You lay down in a scanner that takes a series of pictures of your brain using x-rays.
CTA (CT angiography)	Uses x-rays to visualize blood flow in the arteries.	X-rays are passed from a rotating device through the area of interest. The computer makes a 3 dimensional picture of the area.

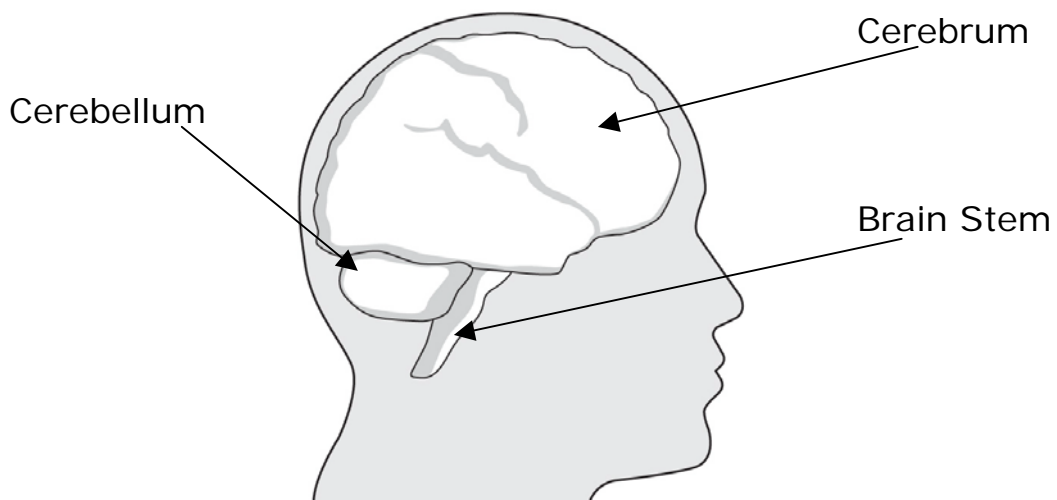
<b>Type of test</b>	<b>Purpose of test</b>	<b>How the test is done</b>
MRA (magnetic resonance angiography)	Used to detect any blocking or hardening of the arteries.	Uses strong magnetic field and radio waves to take pictures of the blood vessels. You are required to lay still in a scanner.
MRI (magnetic resonance imaging)	Used to detect bleeding or brain damage.	Uses non-harmful magnetic field and radio waves to produce a 3 dimensional image of the brain. You are required to lay still in a scanner.
TEE (trans-esophageal echocardiogram)	Done to produce a detail picture of your heart and detect if your heart is producing blood clots.	Uses high frequency sound waves to look at the structures of the heart. It is done by inserting a tube into in the esophagus (food pipe). You are sedated.



# About stroke

## What is a stroke?

A stroke is a sudden loss of brain function. It is caused by the blockage of blood flow to the brain or the rupture of blood vessels in the brain. Each stroke is different. The effects of the stroke depend on where the brain was injured and how much of the brain is damaged.



How well you recover from a stroke depends upon many factors including how much and what parts of your brain were damaged and your health before the stroke.

## Types of stroke

### Ischemic stroke

This type of stroke is caused by a blood clot or a blockage within an artery leading to the brain. This affects the blood flow to the brain.

There are two causes of ischemic stroke:

1. **Embolic stroke** – It is a result of a blood clot that was formed somewhere other than in the brain. The blood clot travels in the bloodstream until it becomes lodged in the smaller arteries leading to the brain.
2. **Thrombotic stroke** – This is the result of diseased or damaged arteries in the brain. The artery becomes blocked by the formation of a blood clot within the brain.

Common terms that your health care team may use if you have this type of stroke:

- **Ischemic** – When the blood flow in the brain is cut off by a blood clot.
- **Atherosclerosis** – The inside of an artery is blocked off by the build up of a thick plaque inside the artery walls.
- **Atherothrombosis** – The build up of a clot over the plaque formed due to atherosclerosis.



## **Hemorrhagic stroke**

This stroke is caused when a diseased vessel bursts in the brain allowing blood to leak inside the brain causing damage.

Common terms that your health care team may use if you have this type of stroke:

- **Aneurysm** – The wall of the artery becomes weak and balloons out. If the aneurysm bursts or leaks blood out it will cause a hemorrhagic stroke.
- **Intracerebral Hemorrhage** – When an artery in the brain breaks and the blood enters the brain.

## **Effects of a stroke**

### **Stroke in the cerebrum**

The cerebrum is the largest part of the brain. It controls your speech, thinking, reasoning, memory, sexual function and your emotions. It also controls the movements in other parts of the body. The cerebrum is divided into two parts; the right and the left side. The effects from your stroke depend on which side of the brain was affected.

## **Right side of the brain**

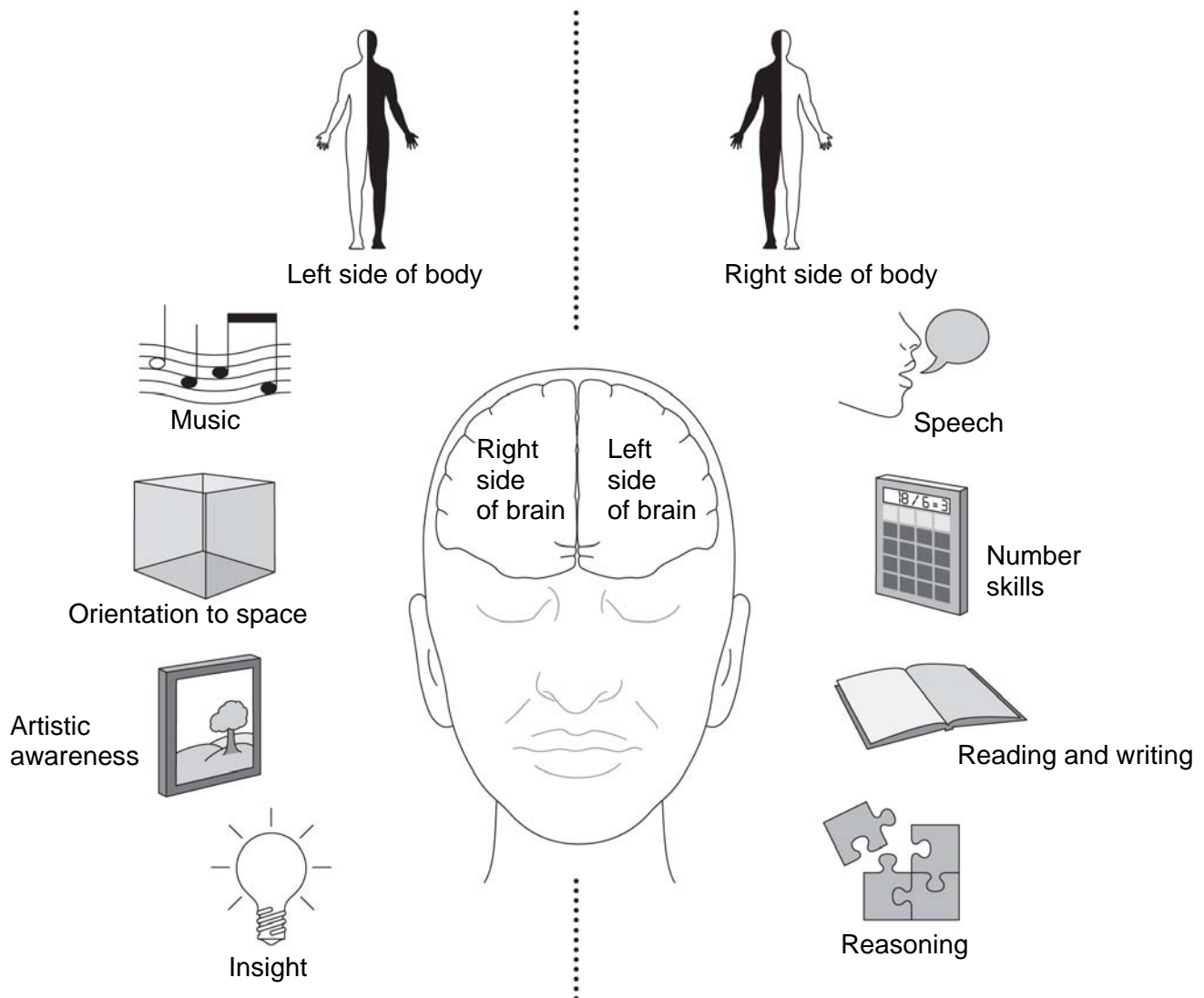
If your stroke occurs in the right side of the brain, then the left side of your body will be affected. You may have:

- weakness or paralysis.
- problems seeing.
- problems distinguishing distance, depth, between up and down, or between front and back. This can make it hard to pick up objects, button a shirt, or tie your shoes.
- problems understanding maps.
- problems with short-term memory. You may be able to remember something that happened several years ago, but not something you did a few minutes ago.
- forgetting or ignoring objects or people on your left side. This is called neglect. You may even ignore your own left arm or leg.
- difficulty in judgment such as acting impulsively or not realizing your own limitations.

## Left side of the brain

If your stroke occurs in the left side of the brain, then the right side of your body will be affected. You may have:

- weakness or paralysis.
- trouble reading, talking, thinking or doing math.
- behaviour to become more slow and cautious than usual.
- trouble learning or remembering new information.
- the need for frequent instructions and feedback to finish tasks.



## **Stroke in the brain stem**

The brain stem is the area at the very base of the brain, right above the spinal cord.

### **If you have had a stroke in the brain stem, this can cause:**

- weakness or paralysis of your arms and legs on **both** sides of the body.
- problems breathing and heart problems.
- difficulty in controlling your body temperature.
- problems in balance and coordination.
- problems chewing, swallowing and speaking.
- problems seeing.

## **Stroke in the cerebellum**

Although strokes are less common in the cerebellum, the effects can be severe.

### **If you have a stroke in the cerebellum, you can have problems with:**

- walking, coordination and balance – this is called ataxia
- dizziness
- headache
- nausea and vomiting

## **TIA**

TIA is short for transient ischemic attack. Transient means short term, ischemic means lack of blood supply. Therefore TIA means a short term, lack of blood supply to the brain. This is a temporary problem, which occurs when the brain does not get enough blood supply. TIA's usually last from 30 seconds to 10 minutes however some can last up to 24 hours. Most short term TIA's do not leave noticeable deficits even though some brain cells may have been damaged.

Minor damage to brain cells may go unnoticed as the other healthy brain cells continue to do the work of the normal functioning brain.

TIA's are often referred to as "mini-strokes" and are considered to be a serious sign of an increased risk of stroke. The short term problems that may occur with a TIA are:

- weakness
- vision problems
- trouble speaking
- dizziness
- headache



# What are the risk factors for a stroke?

## **Risk factors you can do something about:**

- high blood pressure (hypertension)
- high blood cholesterol
- diabetes
- being overweight
- excessive alcohol intake
- being inactive
- smoking
- stress

## **Risk factors you cannot control:**

- age
- gender
- family history
- ethnicity
- history of stroke or Transient Ischemic Attack (TIA)





# Stroke medications

## What medications help?

Medications are used for many reasons. You will have your own medication plan to follow based on your condition. You may need medication to:

- help prevent blood clots
- help prevent another stroke
- lower your blood pressure
- lower cholesterol
- help your heart beat more slowly and strongly

It is important that you take your medications as prescribed. Never take anyone else's medications. Do not share your medications with other people.

## What are the common medications?

The chart on the next few pages lists the common medications used to prevent stroke and treat heart disease. Medication names are listed by their generic name first and then some of the common trade names in brackets.

As many companies can make the same medication, not all names are listed. New medications often come on the market that may not be listed.

If you have any questions, please ask your doctor, nurse or pharmacist.

<b>Generic and Trade Names</b> (generic names are listed 1 <sup>st</sup> with no capital letters)	<b>What medication does</b>
<b>Type of medication</b> <b>Angiotensin-Converting Enzymes (ACE) Inhibitors:</b> benazepril (Lotensin®) captopril (Capoten®, Apo-Capto®) cilazapril (Inhibace®) enalapril (Vasotec®) fosinopril (Monopril®) lisinopril (Prinivil®, Zestril®) quinapril (Accupril®) perindopril (Coversyl®) ramipril (Altace®) trandolapril (Mavik®)	<ul style="list-style-type: none"> <li>• lowers blood pressure</li> <li>• used to treat heart failure</li> <li>• reduces risk of heart attack and stroke</li> </ul> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                     Do not take both an ACE and an ARB medication together.                 </div>
<b>Angiotensin Receptor Blockers (ARB)</b> candesartan (Atacand®) eprosarten (Teveten®) irbesartan (Avapro®) losartan (Cozaar®) telmisarten (Micardis®) valsartan (Diovan®)	<ul style="list-style-type: none"> <li>• lowers blood pressure</li> <li>• may be used instead of ACE Inhibitor if that medication causes you to cough</li> </ul> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                     Do not take both an ACE and an ARB medication together.                 </div>
<b>Beta Blockers</b> acebutolol (Sectral® , Monitran®) atenolol (Tenormin®) bisoprolol (Monocur®) carvedilol (Coreg®) metoprolol (Lopressor®) pindolol (Visken®) propranolol (Inderal®) timolol (Blocadren®)	<ul style="list-style-type: none"> <li>• lowers heart rate and blood pressure</li> <li>• helps to treat and prevent angina</li> <li>• helps to prevent a heart attack in patients who have had one</li> </ul> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                     Do not take these medications if you have asthma.                 </div>
<b>Calcium Channel Blockers</b> <b>Heart rate controlling:</b> diltiazem (Cardizem®SR, Cardizem®CD, Tiazac®) verapamil (Isoptin®, Isoptin SR®)	<ul style="list-style-type: none"> <li>• helps prevent and treat angina</li> <li>• used to lower heart rate and/or blood pressure</li> </ul>

<b>Generic and Trade Names</b> (generic names are listed 1 <sup>st</sup> with no capital letters)	<b>What medication does</b>
<b>Type of medication</b> <b>Non-heart rate controlling:</b> amlodipine (Norvasc®) felodipine (Plendil®, Renedil®) nifedipine (Adalat PA, Adalat XL®)	<ul style="list-style-type: none"> <li>• helps prevent and treat angina</li> <li>• lowers blood pressure</li> </ul>
<b>Diuretics</b> furosemide (Lasix®) hydrochlorothiazide (Apo Hydro®/Novo-Hydrazide®) indapamide (Lozide®)	<ul style="list-style-type: none"> <li>• lowers high blood pressure</li> <li>• removes excess fluids from the body to reduce swelling</li> </ul>
<b>Lipid Lowering Agents - Statins:</b> atorvastatin (Lipitor®) fluvastatin (Lescol®) lovastatin (Mevacor®) pravastatin (Pravachol®) rosuvastatin (Crestor®) simvastatin (Zocor®) <b>Lipid Lowering Agents - Fibrates:</b> bezafibrate (Bezalip®) fenofibrate (Lipidil Micro®) gemfibrozil (Lopid®) <b>Lipid Lowering Agents - Others:</b> ezetimibe (Ezetrol®) nicotinic acid (Niacin)	<ul style="list-style-type: none"> <li>• lowers your total cholesterol and your bad (LDL) cholesterol</li> <li>• may lower triglycerides</li> <li>• may increase your good (HDL) cholesterol</li> <li>• helps prevent another stroke, even when your blood cholesterol is normal</li> </ul>
<b>Platelet Inhibitors and Anticoagulant Medications</b> acetylsalicylic acid, ASA (Aspirin®, Entrophen®, Novasen®) acetylsalicylic acid, ASA+ dipyridamole (Aggrenox®) clopidogrel (Plavix®) ticlopidine (Ticlid®) warfarin (Coumadin®)	<ul style="list-style-type: none"> <li>• used to prevent blood clots or platelets from sticking together</li> <li>• helps to reduce the chance of stroke</li> <li>• you may be on more than one of these medications</li> </ul>

## **What are the side effects of my medications?**

Each medication has its own side effects. You can learn more about the side effects of any medication you take by reading the medication information handouts provided by your hospital or pharmacist. These handouts tell you about the side effects you may notice and when to contact your doctor.

In general, contact your doctor or go to the nearest hospital if you have:

- trouble breathing
- fainting
- dizziness
- severe stomach pain
- increased swelling in both ankles, legs, feet or hands
- fast or irregular heart beats
- bleeding – nosebleeds, black or bloody stools, red urine
- severe skin rash
- severe tiredness or weakness

Call your doctor, nurse or pharmacist if you have any questions about your medication.

**Carry an up-to-date list of your medications and dosages with you all the time.**

## **What do I need to know about my medications before I leave the hospital?**

You, your family members and partner need to know:

- the correct name and dose of your medications
- why you are on these medications
- how to take your medications correctly
- where to keep your medications
- the possible side effects of your medications
- how to refill your prescription

Your nurse, doctor and pharmacist will help you learn this information about your medications while you are at the hospital. Your community pharmacist will review this information with you each time you refill your prescription as well.