

*Perfect Touch Home Health Care, Inc.*

# PATIENT SERVICES HANDBOOK



**During the initial phase of care, the *Perfect Touch Home Health Care, Inc.* registered nurses will visit you**

**for \_\_\_\_\_ times a week.**

**The following services are available, should your plan of care indicate such services:**

- Home Health Aide will visit you \_\_\_\_\_ times a week.**
- Physical Therapy will evaluate you and then visit you \_\_\_\_\_ times a week.**
- Occupational Therapy will evaluate you and then visit you \_\_\_\_\_ times a week.**
- Speech Therapy will evaluate you and then visit you \_\_\_\_\_ times a week.**
- A Dietician will evaluate you and then visit you \_\_\_\_\_ additional times.**
- A Medical Social Worker will evaluate you and then visit you \_\_\_\_\_ additional times.**

**During your care, your input will help *Perfect Touch Home Health Care, Inc.* establish your further plan of care.**

**Patient services are provided without regard to race, color, creed, sex, disability (mental or physical), religion, sexual preference or place of national origin.**

*This book contains information regarding:*

- Home Care Services
- Your Rights and Responsibilities
- Your Right to Make Decisions about Medical Treatment
- Helpful information:
  - Medication Tips
  - Infection Control in the Home
  - Equipment Safety Tips
  - Safety in Your Home
  - Earthquake Safety Tips
  - What To Do In a Disaster
  - Area Resources
  - Emergency Phone Numbers
  - Drug Classification
  - Food and Drug Interaction Guide

## Description of Services

Dear Patient,

Our agency provides nursing, physical therapy, speech therapy, occupational therapy, social services and home health aide services to patients in their homes. These services can only be provided through your doctor's orders and are paid for by your insurance carrier as long as you meet the appropriate eligibility guidelines. A brief description of these guidelines are as follows: (Please note, these guidelines do not guarantee payment for services, and for detailed information you should review your individual policy):

### Medicare

Medicare will only pay for services as long as: 1) you are *homebound*, (that means that it must take a taxing and considerable effort on your part to leave your home) 2) skilled services are medically necessary on an intermittent or part-time basis; 3) you remain under a physician's care while receiving services.

### Medi-Cal/IMS

Medi-Cal and IMS will pay for limited services if: 1) hands-on skilled care is provided; 2) you are homebound; 3) the care is medically necessary.

### Private Insurance

Eligibility guidelines depend on the carrier and an individual's policy. Pre-authorization is usually required and is completed by our office staff.

It is our goal to assist you back to recovery and a normal independent way of life as soon as possible. As you recover, the services of our staff will decrease.

Before you accept our services, you must receive a copy of two forms, “Patient’s Bill of Rights and Responsibilities” and “Your Right to Make Decisions About Medical Treatment”, and be informed of our agency’s policy regarding resuscitation. This means that if necessary, our staff will provide CPR or contact 911 unless instructed otherwise by you. If you do not want our staff to perform resuscitation measures, you must contact your physician, obtain an order, and complete a legal document known as an Advanced Directive. This may be in the form of a Durable Power of Attorney for Health Care, A Declaration Pursuant to the Natural Death Act, a living will, or a Do Not Resuscitate Directive.

Please be advised that if Home Health Aide services are provided, they are to assist you with your personal needs related to your medical condition. Please do not ask them to perform the following tasks:

- Change linens, prepare meals, grocery shop, or wash dishes for ANYONE OTHER THAN YOU, THE PATIENT.
- Move furniture, wash windows, walls, floors or any heavy housekeeping chores
- Drive anyone in their car or drive another car for the patient

These tasks are allowable for patients only: dusting, vacuuming, sweeping, damp mopping, dishes, laundry, linens, and cleaning the bathroom.

We hope these suggestions will aid you in understanding our services. You may contact our office from 9:30 am to 5:30 pm, Monday – Friday. After hours, Saturdays and Sundays, and on holidays leave your message with our answering service. The Registered Nurse On-Call will get back to you as soon as possible.

Thank you for choosing our agency. We hope you will find our service satisfactory, and wish you a speedy recovery.

## PATIENT RIGHTS AND RESPONSIBILITIES

### **As a patient, you have the right to:**

- Be fully informed of your rights and responsibilities and receive this notice before the initiation of care.
- Be treated with respect, consideration of dignity and individuality, including privacy in treatment, care for personal needs, and respect of property.
- Exercise your rights (or your family's or guardian's rights) and voice grievances regarding care or lack of respect for your property without fear of reprisal or discrimination in any way, for any reason.
- Be fully informed of services available in the agency under the terms of your contract with Medicare, Medi-Cal, and/or insurance, and any costs you may incur, and to be taught about your illness so that you and/or your family can understand and help in your recovery and care.
- Be informed, in advance, about the care to be furnished, and any changes in your care to be furnished.
- Be advised, in advance, of the disciplines that will furnish your care, and the proposed frequency of visits and to be assured that the personnel who provide the care are qualified through education and experience.
- Participate in planning your care or treatment and in planning changes in the care or treatment, and to be fully informed by your physician (unless medically contraindicated), your illness, additional diagnosis and prognosis; that you may refuse treatment at any time and to be informed of the consequences of that refusal; and that you may participate of refuse experimental research, or clinical trials.
- Be assured of confidentiality in treatment of personal and medical records and to approve or refuse their release to any individual outside the agency, except in the case of transfer to another health facility or as required by law or third party payment contract.
- Be informed within a reasonable time of anticipated termination of service.
- Be informed of change in payer source in writing no later than 30 calendar days from the date the home health agency becomes aware of the change.
- Receive information on completing advance directives including a description of the applicable state law.

### **As a patient, you have the responsibility to:**

- Sign the required consents prior to care being given or received.
- Provide the agency with complete and accurate health and insurance information.
- Remain under a doctor's care while receiving agency services.
- Treat agency staff and other personnel with respect and consideration.
- Notify the agency when you cannot keep appointments.
- Accept the consequences of refusal of treatment or choice of non-compliance.
- Participate in the planning of your care.
- Provide a safe environment for the agency staff.
- Provide the agency with a copy of advance directives if you have one.

## YOUR RIGHT TO MAKE DECISIONS ABOUT MEDICAL TREATMENT

This section explains your rights to make health care decisions and how you can plan what should be done when you can't speak for yourself.

A federal law requires us to give you this information. We hope this information will help increase your control over your medical treatment.

### **WHO DECIDES ABOUT MY TREATMENTS?**

Your doctor will give you information and advice about treatment. You have the right to choose. You can say "Yes" to treatments you want. You can say "No" to any treatment you don't want- even if the treatment might keep you alive longer.

### **HOW DO I KNOW WHAT I WANT?**

Your doctor must tell you about your medical condition and about what different treatments can do for you. Many treatments have "side effects." Your doctor must offer you information about serious problems that medical treatment is likely to cause you.

Often, more than one treatment might help you- and people have different ideas about which is best. Your doctor can tell you which treatments are available to you, but your doctor can't choose for you. That choice depends on what is important to you.

### **WHAT IF I'M TOO SICK TO DECIDE?**

If you can't make treatment decisions, your doctor will ask your closest available relative or friend to help decide what is best for you. Most of the time that works. But sometime everyone doesn't agree about what to do.

That's why it is helpful if you say in advance what you want to happen if you can't speak for yourself. There are several kinds of "advance directives" that you can use to say what you want and who you want to speak for you.

One kind of advance directives under California law lets you name someone to make health care decisions when you can't. This form is called a Durable Power of Attorney for Health Care.

### **WHAT IF I'M TOO SICK TO DECIDE?**

If you can't make treatment decisions, your doctor will ask your closest available relative or friend to help decide what is best for you. Most of the time, that works. But sometime everyone doesn't agree about what to do.

That's why it is helpful if you say in advance what you want to happen if you can't speak for yourself. There are several kinds of "advance directives" that you can use to say what you want and who you want to speak for you.

One kind of advance directives under California law lets you name someone to make health care decisions when you can't. This form is called a Durable Power of Attorney for Health Care.

### **WHO CAN FILL OUT THIS FORM?**

You can, if you are 18 years or older and of sound mind. You do not need a lawyer to fill out.

### **WHO CAN I NAME TO MAKE MEDICAL TREATMENT DECISIONS WHEN I'M UNABLE TO DO SO?**

You can choose an adult relative or friend you trust as your "agent" to speak for you when you're too sick to make your own decisions.

**HOW DOES THIS PERSON KNOW THAT I WOULD WANT?**

After to choose someone, talk to that person about what you want. You can also write down in the Durable Power of Attorney For Health Care when you would or wouldn't want the medical treatment. Talk to your doctor about what you want and give your doctor a copy of the form. Give another copy to the person named as your agent, and take a copy with you when you go into a hospital or other treatment facility.

Sometimes treatment decisions are hard to make and it truly helps your family and your doctors if they know what you want. The Durable Power of Attorney For Health Care also gives them legal protection when they follow your wishes.

**WHAT IF I DON'T HAVE ANYBODY TO MAKE DECISIONS FOR ME?**

You can use another kind of advance directive to write down your wishes about treatment. This is often called a "living will" because it takes effect while you are still alive, but have become unable to speak for yourself.

The California Natural Death Act lets you sign a living will called a Declaration. Anyone 18 years or older and of sound mind can sign one.

When you sign a Declaration it tells your doctors that you don't want any treatment that would only prolong your dying. All life-sustaining treatment would be stopped if you were terminally ill and your death was expected soon, or if you were permanently unconscious. You would receive treatment to keep you comfortable, however.

The doctors must follow your wishes about limiting treatment or turn your care over to another doctor who will. Your doctors are also legally protected when they follow your wishes.

**ARE THERE OTHER LIVING WILLS I CAN USE?**

Instead of using the Declaration in the Natural Death Act, you can use any of the available living will forms. You can use a Durable Power of Attorney For Health Care form without naming an agent, or you can just write down your wishes on a piece of paper. You doctors and family can use what you write in deciding about your treatment, but living wills that don't meet the requirements of the Natural Death Act don't give as much legal protection for your doctors if a disagreement arises about following your wishes.

**WHAT IF I CHANGE MY MIND?**

You can change or revoke any of these documents at any time as long as you can communicate your wishes.

**DO I HAVE TO FILL OUT ONE OF THESE FORMS?**

No, you don't have to fill out any of these forms if you don't want to. You can just talk with your doctors and ask them to write down what you've said in your medical chart. And you can talk with your family, but people will be more clear about your treatment wishes if you write them down. Your wishes are more likely to be followed if you write them down.

**WILL I STILL BE TREATED IF I DON'T FILL OUT THESE FORMS?**

Absolutely. You will still get medical treatment. We just want you to know that if you become too sick to make decisions, someone else will have to make them for you. Remember that:

- A Durable Power of Attorney for Health Care lets you name someone to make treatment decisions for you. That person can make most medical decisions-not just those about life-sustaining treatment-when you can't speak for yourself. Besides naming an agent, you can also use the form to say when you would and wouldn't want particular kinds of treatment.

- If you don't have someone you want to name to make decisions when you can't, you can sign a Natural Death Act Declaration. This Declaration says that you do not want life prolonging treatment if you are terminally ill or permanently unconscious.

**HOW CAN I GET MORE INFORMATION ABOUT ADVANCE DIRECTIVES?**

Ask your doctor, nurse or social worker to get more information for you.

All of us at our agency want our patients to understand their rights to make medical treatment decisions. We comply with California laws and court decisions on advance directives. We do not condition the provision of care or otherwise discriminate against anyone based on whether or not you have executed an advance directive. We have formal policies to ensure that your wishes about treatment will be followed.

It is your responsibility to provide a copy of your advance directive to the agency so that it can be kept with your records. If you have any questions about any of these forms, please talk to your doctor, your nurse, or call our office. Ask for a social worker to visit you and further explain these directives.

The California Consortium on Patient Self-Determination prepared the preceding text, which has been adopted by the California Department of Health Services to implement Public Law 101-508.

## Information Regarding Your Medication Regimen

Your doctor has prescribed medication to help you treat your condition. This medication will help you only if you take it correctly. Here's how:

### HOW TO FILL YOUR PRESCRIPTION

Have your prescription filled at the pharmacy you ordinarily use. That way, the pharmacist can keep a complete record of your medications. Tell him if you are allergic to any medications.

If you need to refill your prescription, don't wait until the last minute. Refill it before you run out of medication. There should be no disruption in your dosing regime.

### HOW TO TAKE YOUR MEDICATION

Take your medication in a well lit room. Double check the label to make sure you are taking the right medication at the right time. If you don't understand the directions, call your pharmacist or doctor.

If you forget to take a dose or several doses, don't take two or more doses together. Instead, contact your doctor or pharmacist for directions.

Don't stop taking your medication unless your doctor tells you to. Do not self-prescribe or self-regulate.

Make sure you shake the liquid medicine bottles effectively before taking.

### HOW TO STORE YOUR MEDICATION

Keep your medication in its original container or in a properly labeled prescription bottle. If you are taking more than one medication, don't store them together in a pill box or container.

Store your medication in a cool, dry place or as directed by your pharmacist. Don't keep in the bathroom medicine cabinet where heat and humidity may cause it to lose its effectiveness. Some medications require refrigeration. Please read labels closely.

If you have children, make sure your medication containers have childproof caps. Always keep the containers beyond the reach of children.

Wash your hands before taking your medications to avoid contamination.

## At Home Infection Control

Infections can be a major health hazard. An infection is a disease that results when germs invade and grow in the body. Some infections can cause a short illness while others can be very serious. The infections may involve a body part or the whole body. Patients and caregivers need to protect themselves from infections. You can help prevent infections by practicing the following guidelines:

1. Hand washing is the one most important procedure to prevent the spread of infection.
  - a. Wash your hands before and after providing care
  - b. Wash your hands before preparing food
  - c. Wash your hands before eating
  - d. Wash your hands after using the bathroom
  - e. Use liquid soap in the bathroom
2. Each family member should use his or her own towels, washcloths, toothbrush, drinking glass, and other personal care items
3. Wash cooking and eating utensils with hot soapy water after they have been used.
4. Clean cooking and eating surfaces with soap and water of a disinfectant.
5. Do not leave food sitting out and uncovered. Close all food containers. Refrigerate foods that will spoil. Keep hot food hot and cold food cold.
6. Soiled bed linens should be changed immediately. Soiled linens should be washed in hot water using a detergent. Wash separately from other laundry.
7. Soiled disposable products (dressings, diapers) should be placed in a heavy plastic bag, fastened securely and placed in the trash pick-up.
8. Used needles and syringes can be placed into a rigid walled containers (empty bleach bottle), sealed securely and disposed of in the trash for trash pick-up.
9. Damp mop uncarpeted floors at least once a week.
10. Bathroom surfaces: sink, toilet, toilet seat and floor should be cleaned routinely. A disinfectant, bathroom cleaner or a solution of water and detergent is used.
11. Special precautions to prevent infection in your particular condition will be discussed, as necessary, by the nurse at your home visits.
12. Notify the nurse or physician if the patient develops any of the following signs or symptoms: fever, pain or tenderness, fatigue, loss of appetite, nausea, vomiting, diarrhea, rash, sore on mucous membranes, redness or swelling of a body part, and discharge or drainage from any area of the body.
13. Clean up spills of blood or urine with a 10% bleach solution (mix 1 part of bleach to 10 parts of water daily). Throw away unused bleach solution at the end of the day.
14. Whenever possible, the family should wear disposable gloves when in contact with the patient's blood, wound drainage, feces, urine, open areas of the skin, or other bodily fluids.

15. Clean utility gloves with hot soapy water; then disinfect the gloves with a 10% solution of bleach. Throw away and replace cracked gloves.

16. Cover you mouth and nose when coughing or sneezing to prevent the spread of germs. Turn your head to avoid droplets from coughs or sneezes.

## **HOSPITAL BED**

- Always keep wheels locked. Unlock only to move bed.
- Always maintain side rails up and locked into position
- Electric beds may malfunction or a power failure may cause the bed to remain in one position. Always know how to use the manual hand crank
- A bedridden person should always have a way to summon help. Provide patient with a call bell or other emergency response system.
- Unplug electric beds before washing the mattress or framework.

## **WHEELCHAIR**

- Always lack the wheelchair brakes before making transfers to or from your chair or bed or car.
- If you are unable to place both feet flat on the floor do not lean forward in the wheelchair-you may fall.
- Prolonged sitting in the wheelchair may cause pressure sores to develop. Establish a routine of shifting your weight from side to side, up and down, if possible. The armrest of the wheelchair may be padded to help cushion and relieve pressure to arms.

## **WALKER**

- When ready to ambulate stand a few minutes with the walker to steady your balance.
- Walking surface should be dry, clean and well lighted. Removing throw rugs will enhance safety.
- When walking do not look at your feet-look straight ahead.
- Wear supportive, flat soled, non-skid shoes. Avoid high heels and slip-on shoes.
- Attach a light weight bag or basket to your walker to safely carry small items.

## **CANES AND CRUTCHES**

- Avoid walking on slippery, wet or uneven surfaces. Removing throw rugs will enhance safety.
- Make sure the rubber tip on the cane/crutch end is without cracks or tears and that it fits securely.
- Crutches should have padded underarm rests.
- Always look straight ahead while walking with a cane, do not look at your feet.

Always get up slowly from a sitting position and assess if you feel dizzy or off balance. While standing breathe slowly. If dizziness should persist, sit down and call for assistance.

## **Oxygen Therapy**

- NO SMOKING IN YOUR HOME!
- OXYGEN IS NOT TO BE USED AROUND A SPACE HEATER OR STOVE!
- Keep an all purpose fire extinguisher in your home
- Electric blankets and electric heating pads may be a potential hazard
- Use only water-soluble lubricating jelly if needed. Do not use products that contain oil or alcohol, as they flammable.
- Clean your cannula or mask every eight hours with a wet cloth.
- Oxygen tubing should not be covered by bed linen, clothing or furniture.
- Oxygen tank systems should be kept upright and always turned off when not in use.
- Oxygen containers should never be put in the trunk of the car.
- Equipment may be wiped clean with household detergent and warm water.

# SAFETY IN YOUR HOME

## Tips for Staying Independent

Falls or other injuries could leave you unable to live on your own. It is our hope that the following information will enable you to make your home safer and more comfortable. Removing potential hazards and making things easier to do can help you stay independent.

## Having an Emergency Plan

Listed on the back page of this booklet you will find local emergency numbers. If numbers for your particular area are not listed, space is provided for you to include those numbers.

## Remember RACE:

**R= REMOVE** patient and family from immediate danger. Develop a fire escape plan for your home and determine one place for all family members to meet outside in a safe place away from the fire.

**A= ACTIVATE** – call 911. Remember to give your street address.

**C= CONTAIN** the fire, if possible, by closing all doors. Remember your own safety first and do not place yourself in danger.

**E= EXTINGUISH** the fire if possible, if not, evacuate the area. Again, do not place yourself in any danger.

## Fire Safety

Do you have an emergency exit plan?  
Once a fire starts, it spreads rapidly. Since you may not have much time to get out and there may be a lot of confusion, it is important that everyone knows what to do.

## Check Smoke Detectors

Do you have smoke detectors installed in your home?  
If the answer is no, we urge you to purchase smoke detectors for your own personal safety. Not: Some local fire departments or local government agencies will provide assistance in acquiring or installing smoke detectors.

Many home fire injuries and deaths are caused by smoke and toxic gases, rather than the fire itself. Smoke detectors provide an early warning and can wake you in the event of a fire.

You may want to consider Carbon Monoxide detectors for your home safety.

At least one smoke detector should be placed near bedrooms, either on the ceilings or 6-12 inches below the ceiling on the wall. Place smoke detectors away from air vents.

## Are your smoke detectors currently in proper working order?

Check the batteries on a regular basis.

## Getting Rid of Hazards

Hazards that can cause fires, falls and other injuries in the home are easy to overlook.

At the time, they're often easy to fix.

Checking each room for safety hazards can help you prevent injuries.

### Check all rugs, runners and mats

#### Are all small rugs and runners slip-resistant?

Estimates that in 1982, over 2,500 people age 65 and over were treated in hospital emergency rooms for injuries that resulted from tripping over rugs and runners. Falls are also the most common cause of fatal injury to older people.

- Remove rugs and runners that tend to slide.
- Apply double-faced adhesive carpet tape or rubber matting to the backs of rug and runners.
- Purchase rugs with slip-resistant backing
- Check rugs and mats periodically to see if the backing needs to be replaced.
- Place rubber matting under rugs. Rubber matting can be cut to the size of the rug.

Note: Over time adhesive on tape can wear away. Rugs with slip-resistant backing also become less effective as they are washed. Periodically check rugs and mats to see if new tape or backing is needed.

## Check Areas Around Beds

### Are lamps or light switches within easy reach of the bed?

Lamps located close to each bed will enable people getting up at night to see where they are going. Rearrange furniture closer to switches or move lamps close to beds. Install night lights

### Is there a telephone close to your bed?

In case of an emergency it is important to be able to reach the telephone without getting out of the bed.

### Are ash trays, smoking materials, or other fire sources (heaters, hot plates, teapots, etc.) located away from beds or bedding?

Burns are a leading cause of accidental death among seniors. Smoking in bed is a major contributor to this problem. Don't smoke in bed or have hot liquids or other heat sources near the bed.

### Is anything covering your electric blanket when in use?

"Tucking in" electric blankets, or placing additional coverings on top of them can cause excessive heat buildup that can start a fire. Don't set electric blankets so high that they could burn someone.

### Do you ever sleep with a heating pad that is turned on?

Never go to sleep with a heating pad if it is turned on, because it can cause serious burns, even at relatively low settings.

## **Check Bathtub and Shower Areas**

### **Are bathtubs and showers equipped with non-skid mats, abrasive strips or surfaces that are not slippery?**

Wet, soapy tile or porcelain surfaces are especially slippery and may contribute to falls. Apply textured strips or appliques on the floors of tubs and showers. Use non-skid mats in the tub or shower and on the bathroom floor. If you are unsteady on your feet, use a stool with non-skid tips as a seat while showering or bathing.

Grab bars can help you get into and out of your tub or shower, and can help prevent falls. Check existing bars for strength and stability and repair if necessary.

Attach grab bars, through the tile, to structural supports in the wall, or install bars specifically designed to attach to the sides of the bathtub. If you are not sure how it is done, get someone who is qualified to assist you.

## **Check ALL Electrical / Telephone Cords**

### **Are lamp, extension and telephone cords placed out of the flow of traffic?**

Cords stretched across walkways may cause someone to trip. Arrange furniture so that outlets are available for lamps and appliances without the use of an extension cord, place it on the floor against a wall where people cannot trip over it. Move the phone so that telephone cords will not lie where people walk.

### **Are cords out from beneath furniture and rugs or carpeting?**

Furniture resting on cords can damage them, creating fire and shock hazards.

Electric cords that run under carpeting may cause fire. Remove cords from under furniture or carpeting. Replace damaged or frayed cords.

### **Are cords attached to the walls or base boards with nails or staple?**

Nails or staples can damage cords, presenting fire and shock hazards. Remove nails, staples, etc. Check wiring for damage. Use tape to attach cords to walls or floors.

### **Do extension cords carry more than their proper load than indicated by the ratings label on the cord and the appliance?**

Overloading extension cords may cause fires. Standard 18 gauge extension cords can carry 1250 watts. If an extension cord is needed, use one having a sufficient amp or wattage rating. If the rating on the cord is exceeded because of the power requirements of one or more appliances being used on the cord, change the cord to a higher rated one or unplug some appliances.

### **Are heaters that come with a 3-prong plug being used in a 3-prong outlet or with a properly attached adapter?**

The grounding feature provided by a 3-hole receptacle or an adapter for a 2-hole receptacle is a safety feature designed to lessen the risk of shock. Never defeat the grounding feature. If you do not have a 3-hole outlet, use an adapter to connect the heater's 3-prong plug. Make sure the adapter ground wire or tab is attached to the outlet.

**Are small stoves and heaters placed where they can be knocked over, and away from furnishings and flammable materials, such as curtains or rugs?**

Heaters can cause fires or serious burns if they cause you to trip or if they are knocked over. Relocate heaters away from passageways and flammable materials.

**If your home has space heating equipment, such as kerosene heater, a gas heater or an LP gas heater, do you understand the installation and operating instructions thoroughly?**

Unvented heaters should be used with room doors open or window slightly open to provide ventilation. The correct fuel, as recommended by the manufacturer, should always be used. Vented heaters should have proper venting, and the venting system should be checked frequently. Improper venting is the most frequent cause of carbon monoxide poisoning and older consumers are at special risk.

**Check Entrances and Stairs**

**Are entrances safe?**

Put bright lights over front and back doors, or install motion sensor lights that come on when you approach. Replace dim or burned out lights along pathways and halls. Oil or replace locks and handles that don't turn easily or are hard to grasp. Install dead bolt locks on outside doors. Mark keys so they are easy to identify.

**Are stairs and pathways clear?**

Put nonskid strips on the outer edge of steps, or paint the edges white. Repair handrails that aren't sturdy. Replace handrails that don't run the full length of the stairs. Repair broken or

loose steps and cracked or uneven paving. Keep pathways and steps free of hoses, newspapers and other clutter.

**During an Earthquake**

- If you are indoors get under a table, a desk or bed, or brace yourself in a strong doorway. Watch for falling, flying and sliding objects. Stay away from windows.
- If you are outdoors move to an open area away from building, trees, power poles, brick or block walls and other objects that could fall.
- If you are in an automobile, stop and stay in it until the shaking stops. Avoid stopping near trees and power lines, on or under overpasses.
- If you are in a high rise building get under a desk until the shaking stops. Do not use the elevator to evacuate. Use the stairs.
- If you're in a store get under a table, or any sturdy object, or in a doorway. Avoid stopping under anything that could fall. Do not dash for the exit. Choose your exit carefully.

### **If you must evacuate:**

- Prominently post a message indicating where you can be found.
- Take with you:
  1. Medicines and first aid kit
  2. Flashlight, radio and batteries
  3. Important papers and cash
  4. Food, sleeping bags/blankets
  5. Extra clothing
  6. Make arrangements for pets

### **After a disaster:**

- Put on heavy shoes immediately to avoid injury from stepping on glass or other debris
- Check for injuries and give first aid
- Check for fires and fire hazards
  1. Sniff for gas leaks, starting at the hot water heater. If you smell gas or suspect a leak, turn off the main gas valve, open windows and carefully leave the house. Do not turn lights on or off, or light matches or do anything that might make sparks. **Note:** Do not shut off gas unless an emergency exists. If time permits call the gas company or a qualified plumber. **DO NOT** turn it back on until the gas company or plumber has checked it out.
  2. If water leaks are suspected shut off water at main valve.
  3. If damage to electrical system is suspected (frayed wires, sparks, or the smell of hot insulation) turn off system at main circuit breaker or fuse box.

- Check neighbors for injury
- Turn on radio and listen for advisories. Locate light source, if necessary.
- Do not touch downed power lines or objects touched by downed power lines.
- Clean up potentially harmful material.
- Check to see that sewage lines are intact before continued flushing of toilets.
- Check house, roof, chimney for damage.
- Check Emergency supplies.
- Do not use phone except for genuine emergencies.
- Do not go sightseeing.
- Be prepared for after shocks.
- Open closets and cupboards carefully.
- Cooperate with public safety officials. Be prepared to evacuate when necessary.

# **FOOD AND DRUG INTERACTION GUIDE**

# FOOD AND DRUG INTERACTION GUIDE

## GASTROINTESTINAL PREPARATION

Atropine	Take ½ hour before meals. May cause drowsiness. Avoid alcoholic beverages.
Belladonna (Donnatal)	Take ½ hour before meals.
Diphenoxylate (Lomotil)	Avoid alcohol or other depressants such as tranquilizers and sedatives.
Hyoscyamine Sulfate	Same as atropine above.
Propantheline Bromide (Probanthine)	Take ½ hour before meals.
Metoclopramide (Reglan)	Take ½ hour before meals. May cause drowsiness so avoid alcoholic beverages.
Cimetidine (Tagamet)	Take with or immediately after a meal.
Bethanechol (Urecholine)	Take on an empty stomach 1 hour before or 2 hours after meals.

## LAXATIVES

Diocetyl Sodium Sulfosuccinate (Colace)	Take with 8 oz. of water.
Psyllium (Effersyllium, Metamucil)	Take with 8 oz. of water with meals.

## MINERALS

Iron (Fergon, Feosol)	Take on an empty stomach with water. If stomach upset occurs, take after meal or with food. Do not take simultaneously with tetracycline or antacids.
Potassium Chloride	May cause stomach upset. Take after meals or with food and a glass of water.

## ORAL HYPOGLYCEMICS

Chlorpropamide (Diabinese)	Take with milk or food. Avoid alcoholic beverages. May cause stomach upset.
Tolbutamide (Orinase)	Take with milk or food. Avoid alcoholic beverages. May cause stomach upset.
Glyburide, (DiaBeta, Micronase)	May cause stomach upset. Take ½ hour before meals. Avoid alcoholic beverages.

## CARDIOVASCULAR DRUGS

Methyldopa (Aldomet)	Avoid natural licorice. (Most licorice in this country is artificial and not harmful, but imported licorice candy and flavoring from Europe is often natural).
Propranolol (Inderal)	Take with food for best results. If being used for high blood pressure, avoid foods high in sodium or Tyramine.
Nitrates (Isordil, Sorbitrate)	Avoid alcoholic beverages. Take on an empty stomach 1 hour before or 2 hours after meals.
Digoxin (Lanoxia)	Take oral doses after morning meal. Avoid antacids, cough, cold, allergy and appetite suppressants.
Dipyridamole (Persantine)	Take 1 hour before meals with a full glass of water.
Quinidine (Quinaglute, Quinora)	Take with food. May cause stomach upset.

## DIURETICS

Dyazide	Take with milk or food. May cause stomach upset. Include high potassium foods in diet (see below).
Furosemide (Lasix)	Take with milk or food with 8 oz. of water. Include high potassium foods in Diet (see below).
Spirolactone (Aldactone)	Take with milk or food. May cause stomach upset.
Thiazides (Diuril, Hydrodiuril)	Take with milk or food. May cause stomach upset. Include high potassium foods in diet (see below).

## HIGH POTASSIUM FOODS

Artichokes	Apricots	Pumpkin	Honeydew
Asparagus	Avocado	Spinach	Orange/Juice
Dried Beans	Banana	Squash	Prunes/Juice
Bamboo Shoots	Cantaloupe	Tomato/Juice	Dried Fruit
Broccoli	Celery	Potatoes	Rhubarb
Brussel Sprouts	Dates	Veggie Juice	Raisins
Carrots	Figs	Greens	Chocolate

## ANALGESICS

ASA (Aspirin, Empirin)	May cause stomach upset. Take with milk or food.
Narcotics	Take on an empty stomach. Causes drowsiness. Avoid alcoholic beverages. (Morphine, Codeine, Demerol)
Phenazopyridine (Pyridium)	Take ½ hour before meals with a full glass of water.

## ANTIBIOTICS

Cephalosporins (Ceclor, Keflex)	For best results, take on an empty stomach (1 hour before meals or 2 hours after meals). If stomach irritation occurs, take with food or milk.
Chloramphenicol (Chloromcetin)	Same as cephalosporins
Erythromycin Base (E-mycin, Erytab, Eryc)	Take on an empty or immediately before meals.
Stearate Estolate (Liosone)	Absorption unaffected by food.
Ethylsuccinate (EES, Pedlamycin)	Absorption unaffected by food.
Metronidazole (Flagyl)	May cause stomach upset. Take with food. Nausea and vomiting may occur if taken with alcoholic beverages.
Nitrofurantoin (Furadantin, Macrochantin)	May cause stomach upset. For best results, take with milk or food.
Penicillins and Derivatives (Pen G, Pen Vee K, Pentids, Ampicillin, Amoxicillin)	Take on an empty stomach, 1 hour before meals or 2 hours after meals. Take with a full glass of water.
Tetracycline (Achromycin)	Avoid citrus foods, juices and carbonated beverages. Avoid milk and milk products. For best results, take on an empty stomach, 1 hour before meals or 2 hours after meals.

## ANTI DEPRESSANTS

<b>MAO INHIBITORS</b>	
Isocarboxazid (Marplan)	Avoid foods high in Tyramine.
Tranlycypromine (Pamate)	Avoid foods high in Tyramine.
Phenelzine (Nardil)	Avoid foods high in Tyramine.

## FOODS HIGH IN TYRAMINE

Aged Cheese	Bananas	Chocolate	Raisins	Soy Sauce
Aged Meat	Beer	Cola Drinks	Sherry	Wine
Anchovies	Caffeine	Mushrooms	Sausage	Yogurt
Avocados	Chicken Liver	Pickled Herring	Sour Cream	

## MISCELLANEOUS

Aminophylline	May cause stomach upset. Take with food and water. Side effects are increased by caffeine containing foods such as coffee, tea, cocoa and chocolate.
Anticoagulants (Coumadin, Dicoumarol)	Avoid alcoholic beverages. Avoid foods high in Vitamin K: beef liver, oils, green leafy vegetables (kale, brussel sprouts, cabbage, collards, spinach). Avoid taking with salicylates.
Antihistamines	May cause stomach upset, take with food. May cause drowsiness. Do not take concurrently with alcoholic beverages.

Chloral Hydrate (Noctec)	Take with milk or food. May cause stomach upset.
Hydrocortisone	May cause stomach upset, take with milk or food. May decrease the therapeutic effects of aspirin, requiring dosage adjustment, if taken together.
Lithium Carbonate (Lithan, Eskalith)	May cause drowsiness. Do not take with alcoholic beverages. Take after meals or with food or milk. Maintain adequate fluid and salt intake.
Meclizine (Antivert, Bonine, Marezine)	May cause drowsiness. Do not take with alcoholic beverages.
Barbiturates (Phenobarbital)	May cause drowsiness. Do not take with alcoholic beverages or medications containing antihistamines.
Phenytoin (Dilantin)	Take with food to increase absorption and reduce stomach irritation. Avoid alcoholic beverages.
Prednisolone (Delta-Cortef)	Take with milk or food. May cause stomach upset.
Prednisone (Deltasone)	Take with milk or food. May cause stomach upset.
Albuterol (Proventil)	Take with milk or food. May cause stomach upset.
Sinemet	Take with milk or food. May cause stomach upset. Avoid excessive protein.
Sulfa Drugs	Take on an empty stomach with 8 oz. of water.
Thyroid	Avoid brussel sprouts, cabbage, cauliflower, kale, greens, rutabaga, soybeans and turnips.
Alprazolam (Xanax)	Take with milk or food. Avoid alcoholic beverages. May cause stomach upset.

This pamphlet has been prepared for you by the Food & Nutrition management Services and Pharmacy Management Services. It contains information about some common interactions that may occur between food and drugs that you take. It does not attempt to discuss all possible food-drug interactions, nor does it list possible drug-drug interactions. For information regarding drug-drug interactions, you should consult your Pharmacist or Physician.

If you have questions regarding information in this pamphlet, contact your Physician, Pharmacist or Registered Dietitian at your hospital.

**REORDER #30**  
**Food and Nutrition Management Services**  
**6151 W. Century Blvd., Suite #916, Los Angeles, CA 90045**

# **DRUG CLASSIFICATIONS**

# DRUG CLASSIFICATION SHEET

1. Drug classification: **ADRENERGICS**  
**Action:** Vasoconstrictor, vasodilator, nasal decongestant, bronchodilator, decreased insulin output and increased heart action.  
**Side Effects:** Nausea/vomiting, lack of appetite, cramps, insomnia anxiety, dizziness, pallor, flushing and chest pain.  
**Contraindications:** Glaucoma, arrhythmias, severe hypertension; enhanced by antihistamines.
  
2. Drug classification: **ADRENOCORTICAL STEROIDS**  
**Action:** Stimulates secretion of hormones from the adrenal gland; inhibits inflammation.  
**Side Effects:** Nausea/vomiting, headaches, hypertension, weakness, rash, congestive heart failure, compression fractures and poor wound healing.  
**Contraindications:** Congestive heart failure, kidney disease; enhanced by salicylates.
  
3. Drug classification: **ANALGESICS**  
**Action:** Decrease impulses to control nervous system and alleviates pain.  
**Side Effects:** Nausea/vomiting, lack of appetite, dry mouth and constipation.  
**Contraindications:** Epilepsy, asthma, hepatic disease, respiratory diseases, gastro-intestinal disorders, pregnancy; do not use with alcohol.
  
4. Drug classification: **ANTI-ANGINAL**  
**Action:** Acts on smooth muscle, relaxes and dilates coronary vessels, stops anginal pain.  
**Side Effects:** Nausea/vomiting, rash, erythema, abdominal pain, tachycardia, hypotension, headache and dizziness.  
**Contraindications:** Hypersensitivity, pregnancy, children.
  
5. Drug classification: **ANTI-ARTHRITIC**  
**Action:** Acts as an anti-inflammatory  
**Side Effects:** Nausea/vomiting, abdominal pain, flatulence, rash, loss of hair, congestive heart failure, hypertension and pericarditis.  
**Contraindications:** Hypersensitivity, gastro-intestinal problems, renal disease, hepatic disease, pregnancy.
  
6. Drug classification: **ANTI-ARRHYTHMICS**  
**Action:** Slow and strengthens the beat of the heart muscle.  
**Side Effects:** Loss of appetite, nausea/vomiting, diarrhea, abdominal pain, bitter taste in mouth and weakness.  
**Contraindications:** Aortic stenosis, congestive heart failure and heart block.
  
7. Drug classification: **ANTIBIOTICS**  
**Action:** Inhibits growth of micro-organisms, controls infection.  
**Side Effects:** Nausea/vomiting, diarrhea, loss of appetite, increased BUN, protein in urine, vaginitis, hematuria, anemia, dermatitis and photosensitivity.  
**Contraindications:** Hypersensitivity, blood disease; enhanced by other antibiotics, oral Anticoagulants and aspirin.
  
8. Drug classification: **ANTI-COAGULANTS**  
**Action:** Suppresses Vitamin K, decreases clotting property of blood.  
**Side Effects:** Nausea/vomiting, diarrhea, hemorrhage, low white count, gastro-intestinal bleeding, rash, loss of hair and blood in urine.  
**Contraindications:** Bleeding disorders, hepatic or renal disease, pregnancy, postpartum.

9. Drug classification: **ANTI-CHOLINERGICS**  
**Action:** Decrease intestinal motility; relaxes muscles.  
**Side Effects:** Nausea/vomiting, heartburn, constipation, urinary retention, nervousness, headache, rash, drowsiness and blurred vision.  
**Contraindications:** Muscle, hepatic and renal diseases, glaucoma; enhanced by many drugs.
10. Drug classification: **ANTI-CONVULSANTS**  
**Action:** Decreases seizure activity.  
**Side Effects:** Nausea/vomiting, diarrhea, slurred speech, confusion, dizziness, insomnia, nervousness and fatigue.  
**Contraindications:** Hepatic and renal disease, heart block and blood diseases.
11. Drug classification: **ANTI-DIABETIC**  
**Action:** Stimulates Beta cells in pancreas to produce and release insulin; regulates blood sugar.  
**Side Effects:** Hepatic toxicity, allergic reaction, rash and weak.  
**Contraindications:** Hypersensitivity, renal or hepatic disease.
12. Drug classification: **ANTI-DEPRESSANT**  
**Action:** Decreases depression.  
**Side Effects:** Orthostatic hypotension, hypertension, arrhythmias, headache, anxiety, dry mouth, nausea/vomiting, diarrhea, constipation, lack of appetite, decreased sexual drive, rash and edema.  
**Contraindications:** Myocardial infarction, hepatic or renal disease, glaucoma; death may result when used with MAO inhibitors; Phenothiazines inhibit the metabolism of this drug.
13. Drug classification: **ANTI-EMETIC**  
**Action:** Blocks chemoreceptor trigger zone, which in turn acts on vomiting center.  
**Side Effects:** Restlessness, headache, dizziness, anorexia, diarrhea, constipation, dry mouth, palpitations.  
**Contraindications:** Hypersensitivity, shock, children (parenterally), coma, seizure, encephalopathy, bone marrow depression.
14. Drug classification: **ANTI-HISTAMINE**  
**Action:** Competes with histamine, antihistamine.  
**Side Effects:** Nausea/vomiting, diarrhea, stomach pain, lack of appetite, constipation, dizziness, nervousness, insomnia, headache, rash, blurred vision, ringing in the ears and confusion.  
**Contraindications:** Asthma, glaucoma, prostate hypertrophy, coma; enhanced by depressants and alcohol; use with caution in seizure patients.
15. Drug classification: **ANTI-HYPERTENSIVE**  
**Action:** Relaxes vascular, smooth muscles, actions vary with drug; lowers blood pressure.  
**Side Effects:** Nausea/vomiting, diarrhea, constipation, liver disorders, peptic ulcers, sedation, weakness, orthostatic hypotension, anemia and rash.  
**Contraindications:** Pregnancy, lactation, hypersensitivity, myocardial infarctions, children; use cautiously in renal, cardiac, neuro, elderly or CVA patients.
16. Drug classification: **ANTI-NEOPLASTICS**  
**Action:** Decreases cell replication.  
**Side Effects:** Nausea/vomiting, diarrhea, lack of appetite, loss of hair, rash, blood diseases, liver and bowel problems.  
**Contraindications:** Hepatic or renal disease, hypersensitivity, radiation therapy, low blood count; Do not use with radiation.

17. Drug classification: **ANTI-PARKINSON**  
**Action:** Decreases effects of Parkinson's disease.  
**Side Effects:** Nausea/vomiting, loss of appetite, weakness, anxiety, insomnia, orthostatic hypotension, hand tremors, palpitations, hallucinations and urinary incontinence.  
**Contraindications:** Glaucoma, psychosis; use cautiously with tricyclic antidepressants.
18. Drug classification: **ANTI-PYRETICS**  
**Action:** Decreases temperature.  
**Side Effects:** Nausea/vomiting, diarrhea, gastro-intestinal bleeding, heartburn, loss of appetite, rash, increases prothrombin time, ringing in ears, dizziness and headaches.  
**Contraindications:** Hypersensitivity, gastro-intestinal bleeding, bleeding disorder, Vitamin K deficiency, pregnancy; use cautiously in gout, allergies, cardiac or renal disease, pulmonary disease.
19. Drug classification: **BRONCHODILATORS**  
**Action:** Stimulates response to dilate bronchial tubes and increase conduction of the heart; assists with more controlled breathing.  
**Side Effects:** Nausea/vomiting, loss of appetite, gastro-intestinal bleeding, restlessness, anxiety, headache, palpitations and fast pulse.  
**Contraindications:** Renal or hepatic disease and myocardial infarction.
20. Drug classification: **CARDIAC GLYCOSIDES**  
**Action:** Increases force of heart beat and the refractory period in the heart; strengthens the heart and slows the pulse.  
**Side Effects:** Nausea/vomiting, diarrhea, loss of appetite, cramps, headache, drowsiness, confusion and visual disturbances.  
**Contraindications:** Ventricular tachycardia and fibrillation; do not use with antihistamines, anticonvulsants, barbituates and hypoglycemic agents.
21. Drug classification: **CHOLINERGICS**  
**Action:** Causes vasoconstriction with a fall in blood pressure; slows heart rate, increases salivation, sweating, gastro-intestinal and genital-urinary tone and movement.  
**Side Effects:** Vision problems, headache, nervousness, dizziness, rash; if taken internally, nausea/vomiting, diarrhea and frequency of urination.  
**Contraindications:** Eye abrasions, asthma, diabetes, eye inflammation, cardiac disease.
22. Drug classification: **DIURETICS**  
**Action:** Decreases water reabsorption in the kidney by increasing sodium loss which leads to water loss in the body.  
**Side Effects:** Frequency of urination, hematuria, vomiting, diarrhea, hepatic failure, flushing, lethargy and orthostatic hypotension.  
**Contraindications:** Severe renal disease, COPD, pregnancy, infants, lactation, electrolyte imbalance.
23. Drug classification: **ELECTROLYTE REPLENISHERS**  
**Action:** Replaces electrolytes.  
**Side Effects:** Nausea/vomiting, diarrhea, decreased blood pressure, arrhythmias, confusion, tingling of extremities, weakness, paralysis, gastro-intestinal problems.  
**Contraindications:** Use cautiously in renal or cardiac disease, dehydration, severe burns, hyperkalemia; do not administer with Spironolactone, Triamterene or salt substitutes.
24. Drug classification: **ESTROGENS**  
**Action:** Increases actions of the reproductive hormones.  
**Side Effects:** Headaches, dizziness, depression, libido changes, lethargy, thrombophlebitis, hypertension, edema, visual changes, GI effects (i.e. nausea/vomiting, abdominal cramps, bowel changes, appetite changes) changes in menstrual flow, jaundice, electrolyte imbalance, rash, breast tenderness, leg cramps.  
**Contraindications:** Thrombophlebitis, undiagnosed abnormal genital bleeding.

25. Drug classification: **LAXATIVES**  
**Action:** Retains water and adds fats; lubricates and irritates the mucosa.  
**Side Effects:** Cramps, electrolyte imbalance, rash and nausea/vomiting.  
**Contraindications:** Intestinal obstruction, lower abdominal pain and fecal impaction.
26. Drug classification: **MUSCLE RELAXANTS**  
**Action:** Interferes with nerve impulses in the muscles.  
**Side Effects:** Headache, dizziness, lethargy, uncoordination, nausea/vomiting and hypotension.  
**Contraindications:** Myasthenia gravis, cardiac disease, infants; enhanced by alcohol.
27. Drug classification: **PROGESTERONES**  
**Action:** Suppresses ovulation, forms a thick cervical mucous.  
**Side Effects:** Headache, dizziness, depression, hypertension, lethargy, thrombophlebitis, edema, nausea/vomiting, abdominal cramps, changes menstrual flow, jaundice, hyperglycemia, libido changes, rash, breast tenderness, enlargement or secretions.  
**Contraindications:** Thromboembolic disorders, breast cancer, undiagnosed vaginal bleeding, Hepatic disease.
28. Drug classification: **SEDATIVE/HYPNOTICS**  
**Action:** Induces sleep.  
**Side Effects:** Nausea/vomiting, diarrhea, lack of appetite, headache, dizziness, hypotension, circulatory or respiratory depression, rash, edema, confusion.  
**Contraindications:** Hypersensitivity, severe hepatic and renal disease
29. Drug classification: **THYROID HORMONES**  
**Action:** Replaces thyroid hormone.  
**Side Effects:** Palpitations, arrhythmias, angina, headache, tremors, insomnia, nervousness, loss of appetite and weight loss.  
**Contraindications:** Nephrosis, hyperthyroidism, thryotoxicosis, may increase effect of anticoagulants and insulin.
30. Drug classification: **TRANQUILIZERS**  
**Action:** Produces a calming effect.  
**Side Effects:** Confusion, headache, agitation, over sedation, dizziness, insomnia, weakness, constipation, loss of appetite, decreased sex drive, blurred vision and urinary retention.  
**Contraindications:** Glaucoma, children under 6, psychosis, pregnancy. Do not use with alcohol or Central nervous system depressants; antacids and food decrease absorption rate; potentiated by Phenothiazines, MAO inhibitors, antidepressants and central nervous system depressants.
31. Drug classification: **VASODILATORS**  
**Action:** Dilates skeletal muscle and increases blood flow.  
**Side Effects:** Nausea/vomiting, abdominal distension, hypotension, fast pulse and dizziness.  
**Contraindications:** Pregnancy, lactation; use with caution in cardio disease, myocardial infarctions.

**Comments –**

---



---



---



---

*Perfect Touch Home Health Care, Inc.*  
7250 Beverly Blvd., Suite 205  
Los Angeles, CA 90048-4126

FIRE DEPARTMENT, POLICE AND SHERIFF

**911**

**EMERGENCY CALLS ONLY:**

Fire & Rescue, Police, Sheriff and Highway Patrol,  
Ambulance and Paramedics

**TELECOMMUNICATIONS DEVICES FOR THE DEAF  
(TDD) EMERGENCY CALLS**

LLAMADAS EMERGENCIA APARTATO DE  
TELLECOMMUNICACIONES PARA LOS SORDOS (TDD)

**BAUDOT MODE ONLY: DIAL 911**

*Press the space bar until someone answers.*

**BAUDOT APATOS SOLEMENTE: MARQUE 911**

*Oprima la barra espaciadora hasta que alguien le conteste.*

**EMERGENCY PHONE NUMBERS**

Physician: \_\_\_\_\_ Pharmacy: \_\_\_\_\_ Ambulance: \_\_\_\_\_

**Other important phone numbers:**

---

---

---

---

## PATIENT RESOURCES/EMERGENCY NUMBERS

Your Home Health Care Agency is:

*Perfect Touch Home Health Care, Inc.*  
(323) 852-1959

*Perfect Touch Home Health Care, Inc.* staff is proud to have the opportunity to provide home health services to you. The following information will help you understand how to call for help in urgent or emergency situations.

### IN CASE OF A DISASTER

Remain in a safe place. Turn your radio dial to  
**KISS RADIO LA at 102.7 or 1150 AM or call (818) 845-1027 or (818) 520-1027.**

While receiving your services,  
someone from *Perfect Touch Home Health Care, Inc.* will be contacting you.

**THE AGENCY IS NOT AN EMERGENCY CARE FACILITY.**

*Emergencies are referred to acute care facilities.*

### EMERGENCY NUMBERS

#### **Paramedic, Fire, Police, Ambulance Companies**

Med Trans	<b>911</b> (818) 990-5555 (818) 984-0777 (805) 495-4668
Schaefer	(818) 781-0992
Halls	(805) 327-4111
Bowers	(213) 622-4445
Sunset Bus	(310) 404-8700
Empire Trans Med	(310) 921-1416
American Red Cross	(818) 375-1700 (213) 739-5555
Child Abuse Hotline	(800) 540-4000
Department of Aging (City)	(213) 368-4000
Department of Aging (County)	(213) 738-4004
Department of Health Services (Home Health Hotline)	(800) 228-1019
National Institute of Aging	(800) 222-2225
Legal Aid Foundation	(800) 399-4529
LA info Line for Community Services/Resources	(800) 339-6993 (213) 686-0950
Mayor's Office for the Disabled (Info: Handicap Stickers)	(213) 485-6334
Medicare Hotline	(800) 638-6833
Social Security Office	(800) 772-1213

## **PATIENT RESOURCES**

<b>MEDICAL SERVICES</b> (Physical, Mental, Pharmacies) –	
Medical Information (Health Center Referral)	(213) 250-8055
National Institute for Drug Abuse	(800) 662-4357
Nursing Home Information and Referral Service	(800) 777-2866
Pharmacy 24 Hour CVS Referral Line	(800) 627-2866
Fair Housing Council	(818) 373-2285
HUB User (Info on Elderly & Handicapped Housing)	(800) 245-2691
Emergency Shelter	(213) 686-0950
Emergency Food	(213) 686-0950
Food Stamp Application Information Line	(213) 686-0950
Salvation Army –	
Glendale	(818) 246-5586
Los Angeles	(213) 484-7775
San Fernando	(818) 781-3300

## **TRANSPORTATION**

Bell Taxi	(800) 666-6664
City Ride	(213) 483-5372
LA Transportation Authority (information on Bus/Rail)	(800) 266-6883
Metro Access	(800) 827-0829

**These referral sources are given to the patient/caregiver for emergencies. *Perfect Touch Home Health Care, Inc.* has 24-hour on-call availability by calling (323) 852-1959.**