

PATRICK MALONE & ASSOCIATES, P.C.

From Tragedy To Justice - Attorneys For The Injured

We win exceptional verdicts and settlements for our clients in cases of brain injury, medical malpractice, wrongful death and other severe injuries.

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[Our firm's website](#)

[Read an excerpt](#) from Patrick Malone's book:

The Life You Save: Nine Steps to Finding the Best Medical Care -- and Avoiding the Worst

Protecting a Loved One in the Hospital (One of a series on getting the best medical care)

Dear Subscriber,

Just in time for the holidays, some bad news and some good news about hospital care:

Bad: The odds of suffering a preventable injury in the hospital are way higher than anyone thinks is reasonable. When a research team did a comprehensive review of medical records recently, they found as many as one in four hospital admissions marred by malpractice or some other type of injury, and most of them were preventable. (Read more [here](#), and a similar report from another new study [here](#). This second study found one in seven Medicare patients injured by preventable mistakes.)

Good: Patients and families can do a lot to prevent injury from the most common errors. And I can teach you how.

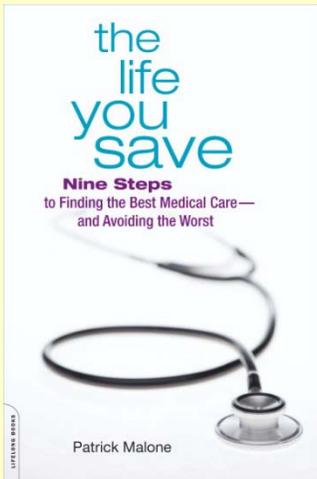
So this month, I offer tips on how to protect your family members and friends when they are hospitalized -- and how they can help you if you're in that unlucky situation. Read on for more details.

NOTE: All these tips are boiled down from my book, "[The Life You Save](#)." Check it out from Amazon if you want to learn more.

As before: Feel free to "unsubscribe" on the button at the bottom of this email. But if you find it helpful, pass it along to people you care about.

Step One: Have Someone in the Hospital Room at All Times

The hardest but most effective thing to do is to be there. That means 24/7. We can all find a million reasons not to do it, but that's the first step that needs to be done: have a lay advocate at the patient's bedside at all times.



Learn More



Read our [Patient Safety Blog](#), which has news and practical advice from the frontlines of medicine for how to become a smarter, healthier patient.



Simple ways to make it easier:

- * Hire a sitter -- or private duty nurse if you can afford one -- to fill in times when you cannot be there.
- * Have family members take shifts.

You don't need to know one single thing about medicine to be an effective lay advocate at a family member's hospital bedside. You just have to have an inquisitive mind and a willing heart.

See the next section for simple tips on two of the most common, simplest but potentially deadliest issues: Falls and bed sores (pressure ulcers).

Next issue, we'll talk about three more key problems to watch out for:

- * Medication errors.
- * Infections.
- * Blood clot prevention.

Two potentially deadly but preventable harms: Falls and bed sores

Falls: Falls are often the beginning of the end for a healthy elderly person. In the hospital, the most common cause of a fall is no surprise: the patient has to go to the bathroom in the middle of the night, in an unfamiliar place, and may have medicines on board that add to confusion and wooziness. They punch the call button. The nurse never seems to come. So they try to negotiate the trip on their own. And the predictable happens. To make sure this never happens, the family member functions as a private-duty nurse. If you don't feel comfortable helping the patient, make sure they stay in the bed until the nurse or the aide shows up. It's that simple.

Bed sores or pressure ulcers. If your patient is immobile, the hospital needs a regular routine for turning them to prevent sores that turn into gaping wounds that can kill. Find out what the schedule is and enforce it. And you can gently inspect your loved one for early signs of sores - often just a red rash. The two most common areas are the tail bone (sacrum) just above the gluteal cleft, and the heels, because they become pressure points in immobile people. A nickel-sized sore can turn into a painful ulcerated wound with breathtaking speed.

Next newsletter: More Preventable harms: Wrong medicine, infections, blood clots.

But if you cannot wait for my next newsletter, the best nutshell advice is this: Prevention starts with knowing there's a big risk and finding out what is the plan. And if there's no specific plan, the hospital needs to implement one. That applies to preventing blood clots, a huge killer of hospitalized patients, heading off deadly infections, and making sure the patient gets the right medicines each time.

Past issues of this newsletter:



Our first newsletter focused on the problem of conflicts of interest in medicine -- what you need to know in general, and how to find out if your doctor has a conflict that might affect the quality of your care. [Click here](#) to see that newsletter again.

Newsletter No. 2 expanded the discussion into the related topic of why experience counts -- especially when choosing a surgeon. We focused on the story of minimally invasive prostate surgery with the device called the da Vinci robot. We explained how the lessons apply to any kind of surgery or medical procedure. To see newsletter No. 2 again, [click here](#).

Newsletter No. 3 talked about why "more is not always better" in modern medicine. We focused on cancer screening, especially for breast and prostate cancer, and why you can feel not so guilty if you're a little less aggressive about getting the test. (But if you have any symptoms, you shouldn't wait!) [Click here](#) to read it again.

Newsletter No. 4 talked about choosing a hospital, and why the best known rating systems such as U.S. News & World Report may not be all they're cracked up to be. I give some tips about other ways to make sure your hospital is up to par. Click [here](#) to read it again.

Newsletter No. 5 talked numbers -- how it's important for all consumers of health care who want to make informed choices to learn a little bit about how statistics are used -- and misused -- in health care. I introduced readers how to read medical statistics in a straightforward way. To read it again, [click here](#).

Newsletter No. 6: Back pain and heart disease: how less can be more. The simpler approaches can work just as well as or better than more complex kinds of surgery. [Here's the link](#) to see it again.

Newsletter No. 7: Preventive care: what every adult American needs. [Here's the link](#).

Newsletter No. 8: Colonoscopy: two questions you must ask to make sure you get a competent screening exam. These questions can be a real life-saver when you know how often colonoscopies miss life-threatening lesions. [Read more here](#).

No. 9: Why getting and reading your own medical records can save your life -- and how to do it. The link is [here](#).

No. 10: The joys of being a health care skeptic -- or, Why statisticians are our friends. And more on why most published research eventually turns out to be wrong. The link [is here](#).

To your continued health!

Sincerely,

Patrick Malone
Patrick Malone & Associates

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Patrick Malone & Associates, P.C. | 1331 H Street N.W. | Suite 902 | Washington | DC | 20005