

▪ **Welcome** ▪

Your family member has been admitted to the Intensive Care Unit (ICU)/Cardiovascular Recovery Unit (CVR)/Cardiac Care Unit (CCU) for a condition requiring close observation, cardiac monitoring and skilled nursing care. We welcome the opportunity to care for your loved one and want to give you some information to assist you during this time.

▪ **Patient Representative/Volunteers** ▪

A patient representative/volunteer is stationed at the ICU/CVR/CCU Waiting Area from 8:00 a.m. to 4:30 p.m. Patient representatives/volunteers assist family members in communicating with members of the health care team and addressing the needs of families and visitors. Please contact the patient representative/volunteer if you have any problems or questions. We are here to serve you and to make your stay as comfortable as possible.

▪ **Nursing Staff** ▪

The nursing staff works with the doctors and other health care team members to provide care for your loved one. At the time of admission into the ICU/CVR/CCU units, your nurse will help explain the necessary treatment. Members of the nursing staff are on duty 24 hours a day. Below are spaces for you to write the names of those nurses taking care of your loved one:

Admitting nurse: _____

Other nurses: _____

▪ **Hand Washing** ▪

To eliminate germs entering the ICU/CVR/CCU units from the outside environment, all visitors must wash their hands prior to and after visiting their loved ones. Sinks are located directly outside each patient's room.

▪ **Visiting Times** ▪

Patients can benefit from a familiar face, voice or touch, so we encourage visits from family, significant others and clergy. It is our goal to provide quality care to your loved one, so we have scheduled visiting times that allow the ICU/CVR/CCU staff to perform their duties. The following visiting times may be adjusted depending on the acuity level of the patient.

10:00 a.m. to 10:30 a.m.	2:00 p.m. to 2:30 p.m.
5:30 p.m. to 6:00 p.m.	8:30 p.m. to 9:00 p.m.

Two people may visit at a time. No children under 12 years of age are allowed in the ICU/CVR/CCU units.

Please do not enter the ICU/CVR/CCU units until you are called by the patient representative/volunteer. On occasion, visiting times may be delayed. Do not be alarmed. This could happen for a number of reasons. The patient representative/volunteer will keep you informed concerning the situation and will call you when the visiting period begins.

You will enter the ICU/CVR/CCU units through their respective sub-waiting areas. Please lift the wall phone receiver to let staff know you are present and waiting to come in. If no one responds to your call, please push the receiver button again. When visiting, please do not empty bedpans or urinals in the patient's room. Nursing staff will do this, as they have to measure the patient's output of fluid.

The ICU/CVR/CCU team works best when patients and loved ones get to know the staff, establish communication channels and share their questions and concerns. Write your questions down so they can be addressed when you visit.

It is helpful to have a spokesperson for the family that the staff can communicate with regularly. It is of the utmost importance that staff members have a way to contact the spokesperson at all times. This individual can then pass on vital information to update others. Please leave the necessary information with the nurse on your first visit. A password must be established so that family and friends out of town or those who cannot visit will be allowed to check on the patient by phone.

▪ **Communication with Doctors** ▪

The doctors will be in touch with you about your loved one. They may contact you in the waiting area, in the ICU/CVR/CCU units or by telephone. Because of emergencies, surgeries and other delays, your doctors may not be able to make rounds at the same time each day.

▪ **Consulting Physicians** ▪

The doctor may require assistance from other physicians specializing in various areas of expertise, such as lungs, heart, etc. Below is a space for you to write the names of doctors consulted to provide care for your loved one:

▪ **Chapel and Chaplains** ▪

The Prayer Room is located on the first floor in the ICU/CVR/CCU Waiting Area and is available for your use from 8:00 a.m. until 4:30 p.m. If you would like to speak with a clergy member, contact the patient representative/volunteer. If you would like to access the Prayer Room, see the patient representative/volunteer or security.

▪ **Other Questions** ▪

Social workers and other hospital staff are available to help with other concerns about hospitalization, further treatment, financial issues, care of patient after discharge, etc. Your loved one's nurse, patient representative or volunteer will help you contact the right source for assistance.



A Visitor's Guide to the ICU/CVR/CCU Waiting Area

Intensive Care Unit

601.553.6161

Cardiovascular Recovery Unit

601.553.6161

Cardiac Care Unit

601.553.6151

Visiting times:

- **10:00 a.m. to 10:30 a.m.**
- **2:00 p.m. to 2:30 p.m.**
- **5:30 p.m. to 6:00 p.m.**
- **8:30 p.m. to 9:00 p.m.**



2124 14th Street
Meridian, Mississippi
601.553.6000

AndersonRegional.org

▪ Overnight Accommodations ▪

We strive to keep the waiting room as quiet and comfortable as possible for family members and visitors.

We ask that only two persons per patient stay between 10:30 p.m. and 6:30 a.m. and that you limit your personal belongings. Please do not bring pillows, blankets or air mattresses from home. After the last visitation of the evening, linens will be provided for family members staying overnight.

Please note: We have a limited number of rental rooms for overnight guests who prefer a more private setting. Please go to the Information Desk window and ask the operator about availability.

▪ Belongings ▪

Anderson Regional Medical Center is not responsible for items left in the waiting area; therefore, family members are encouraged to limit items left there. The patient's money and valuables should be taken home or otherwise secured upon admission to the hospital. Please see the admissions clerk if you need assistance.

▪ Telephones ▪

The number for incoming calls to the waiting area is 601.553.2071. If family members are not available, the patient representative/volunteer will take a message. Please check with the patient representative/volunteer for messages.

▪ Tobacco Use ▪

The use of tobacco in any form is not permitted in Anderson Regional Medical Center.

▪ Food and Drinks ▪

Food and drinks are permitted only in the snack area of the waiting room. Churches and individuals donating food have been asked to donate pre-packaged food only. Coffee is available in the snack area. **You are encouraged to eat your meals in our cafeteria.** Cafeteria hours are:

Breakfast.....6:30 a.m. to 10:00 a.m.

Lunch10:45 a.m. to 1:30 p.m.

Dinner.....4:30 p.m. to 7:00 p.m.

Our coffee shop in the north lobby is open seven days a week from 6:00 a.m. to 7:00 p.m. The cafeteria is located on the ground floor of the hospital.

▪ Gifts and ICU/CVR/CCU Patients ▪

Due to limited space, flowers, balloons, novelties and food are not allowed in the ICU/CVR/CCU units. A bulletin board is in each room for displaying cards, pictures, etc.

▪ Mail ▪

The patient representative or a volunteer will distribute mail to family members Monday - Friday. Mail should be addressed to patients at the hospital address, with their room number included, to:

**Anderson Regional Medical Center
2124 14th Street • Meridian, MS 39301**

▪ Tissue and Organ Donation ▪

Mississippi law requires hospitals to inform family members of a deceased patient (who has been determined medically suitable for tissue/organ donation) about the opportunity to consent to the donation. Representatives from the Mississippi Organ Recovery Agency or the tissue bank will be available to assist family members with this important decision.

▪ Terms You May Hear ▪

Respirator or Ventilator

Occasionally a patient may have difficulty breathing and require assistance. A soft tube is inserted through the nose or mouth into the airway leading to the lungs. This tube is then connected to a ventilator — the machine that helps the patient breathe. The patient will not be able to talk, but can communicate his or her needs to others with sign language, writing or communication art board.

Restraints

Restraints are sometimes used for the patient's safety. If the patient is at risk for accidentally removing a tube, line, etc., restraints may be necessary.

Pulse Oximetry

This is a small machine placed on the patient's finger, toe, earlobe, nose or forehead to measure the oxygen level in the blood.

▪ Terms You May Hear ▪

Swan-Ganz Catheter (PA Line)

This is a small tube placed into the neck or upper chest by the doctor. The tube is used to measure the level of fluid in the right and left side of the heart, as well as the lungs. Fluids and/or medications may also be administered through this tube.

Arterial Line

This is a small tube placed in an artery of the wrist or the groin to measure blood pressure. It is connected to an IV bag under pressure and to the heart monitor. The reading may change as the patient moves. The alarms are set to check for changes in blood pressure.

Heart (Cardiac) Monitoring

The person you are visiting will be placed on a heart monitor by means of adhesive electrodes. This machine allows the staff to observe the activity of the patient's heart. A picture of the heart's activity is shown on a screen above the patient's bed and at the nurses' station, where trained personnel are monitoring the heart pattern.

In addition to recording the heart's activity, the monitor also detects muscle activity as the patient moves about in the bed. Such activity may produce a very irregular pattern on the screen, along with an alarm.

Intravenous (IV) Therapy

Intravenous (IV) therapy is a way of providing necessary fluids, medicine and nutrition (food). Intravenous therapy may be given through the veins in the arms, neck, upper chest or groin. In the ICU/CVR/CCU, a machine is used to control the amount of fluids given.

▪ Terms You May Hear ▪

Foley Catheter

This is a small tube placed in the bladder. The tube is attached to a bag that collects urine. The tube is placed in those patients unable to urinate on their own and in those patients that need their urine measured.

Nasogastric Tube (NG Tube)

This is a tube placed through the nose, down the back of the throat and into the stomach. The tube can be used to remove air and stomach fluid. The tube can also be used to send food or fluids into the stomach. The tube is not painful but may be a little uncomfortable around the nose and back of the throat. Usually, while this tube is in, the patient will not be eating or drinking.

