



Be An Active Member of Your Health Care Team

U.S. Department of Health and Human Services
Food and Drug Administration
in cooperation with the
Council on Family Health



When it comes to using medicine, it is important to know that no medicine is completely safe.

The U.S. Food and Drug Administration (FDA) judges a drug to be safe enough to approve when the benefits of the medicine outweigh the known risks for the labeled use.

Doctors, physician assistants, nurses, pharmacists, and YOU make up your health care team. To reduce the risks from using medicines and to get the most benefit, you need to be an active member of the team.

*To make medicine use **SAFER:***

- **S**peak up
- **A**sk questions
- **F**ind the facts
- **E**valuate your choices
- **R**ead the label and follow directions



SPEAK UP

The more information your health care team knows about you, the better the team can plan the care that's right for you.

The members of your team need to know **your medical history**, such as illnesses, medical conditions (like high blood pressure or diabetes), and operations you have had.

They also need to know **all the medicines and treatments you use**, whether all the time or only some of the time. Before you add something new, talk it over with your team. Your team can help you with what mixes well, and what doesn't.

It helps to give a **written list** of all your medicines and treatments to all your doctors, pharmacists and other team members. Keep a copy of the list for yourself and give a copy to a loved one.

Be sure to include:

- prescription medicines, including any samples your doctor may have given you
- over-the-counter (OTC) medicines, or medicines you can buy without a prescription (such as antacids, laxatives, or pain, fever, and cough/cold medicines)
- dietary supplements, including vitamins and herbs
- any other treatments
- any allergies, and any problems you may have had with a medicine
- anything that could have an effect on your use of medicine, such as pregnancy, breast feeding, trouble swallowing, trouble remembering, or cost

ASK QUESTIONS



Your health care team can help you make the best choices, but you have to ask the right questions. When you meet with a team member, have your questions written down and take notes on the answers. You also may want to bring along a friend or relative to help you understand and remember.

Use the **Question Guide** at the end of this pamphlet to help you get the answers you need from your health care team. If you don't understand an answer, ask again.

FIND THE FACTS

Before you and your team decide on a prescription or OTC medicine, learn and understand as much about it as you can, including:



- **brand and generic (chemical) names**
- **active ingredients**—to make sure that you aren't using more than one medicine with the same active ingredient
- **inactive ingredients**—if you have any problems with ingredients in medicines, such as colors, flavors, starches, sugars
- **uses ("indications" and "contraindications")**—why you will be using it, and when the medicine should/should not be used
- **warnings ("precautions")**—safety measures to make sure the medicine is used the right way, and to avoid harm
- **possible interactions**—substances that should not be used while using the medicine. Find out if other prescription and OTC medicines, food, dietary supplements or other things (like alcohol and tobacco) could cause problems with the medicine
- **side effects ("adverse reactions")**—unwanted effects that the medicine can cause, and what to do if you get them
- **possible tolerance, dependence, or addiction**—problems that some medicines can cause, and what you can do to avoid them

- **overdose**—what to do if you use too much
- **directions**—usual dose; what to do if you miss a dose; special directions on how to use the medicine, such as whether to take it with or without food
- **storage instructions**—how and where to keep the medicine
- **expiration**—date after which the medicine may not work, or may be harmful to use

Your pharmacy, the library, the bookstore, the medicine maker, and the Internet have medicine information made for consumers. If you have questions, ask your health care team.

EVALUATE YOUR CHOICES – Weigh the Benefits and Risks

After you have all the information, think carefully about your choices. Think about the helpful effects as well as the possible unwanted effects. Decide which are most important to you. This is how you weigh the benefits and risks. The expert advice from your health care team and the information you give the team can help guide you and your team in making the decision that is right for you.



READ THE LABEL AND FOLLOW DIRECTIONS

Read the label to know what active ingredient(s) is (are) in the medicine.

The active ingredient in a prescription or OTC medicine might be in other medicines you use. ***Using too much of any active ingredient may increase your chance of unwanted side effects.***

Read the label each time you buy an OTC medicine or fill your prescription.

When buying an OTC, read the "Drug Facts" label carefully to make sure it is the right medicine for you. Prescription and OTC medicines don't always mix well with each other. Dietary supplements (like vitamins and herbals) and some foods and drinks can cause problems with your medicines too. Ask the pharmacist if you have questions.



Before you leave the pharmacy with your prescription, be sure you have the right medicine, know the right dose to use, and know how to use it. If you've bought the medicine before, make sure that this medicine has the same shape, color, size, and packaging. Anything different? Ask your pharmacist. If your medicine tastes different when you use it, tell your health care team.

Read and save all the information you get with your medicine.

Read the label each time *before* you use the medicine. Be sure it's right in 5 ways:

1. the right medicine
2. for the right patient
3. in the right amount
4. at the right time
5. in the right way (for example, swallow instead of chew a pill)

Follow directions on the label and from your health care team. When you are ready to use the medicine, make the most of the benefits and lower the risks by following the directions.

If you want to stop a medicine your doctor told you to use or to use it in a different way than directed, talk to a team member. Some medicines take longer to show that they are working. With some medicines, such as antibiotics, it is important to finish the whole prescription, even if you feel better sooner. When you stop using some medicines, you must reduce the dose little by little to prevent unwanted side effects.

REPORT BACK TO THE TEAM

Pay attention to how you feel. If you have an unwanted effect, tell your health care team right away. A change in the dose or a change in medicine may be needed.

QUESTION GUIDE

Use this guide with your health care team to find out what you need to know about the medicines you use, and about the medicines you are thinking about using. Be sure to find the answers to these questions for any sample medicine your doctor gives you.

- What are the brand and generic (non-brand) names of the medicine?
- What is the active ingredient?
- Could I use a generic form?
- What is the medicine for, and what will it do for me?
- When should I start to feel better?
- When should I report back to the team?
- Will this medicine take the place of any other medicine I have been using?
- Should I avoid any drinks, foods, other substances, or activities while using this medicine?
- Can this medicine be used safely with the other medicines and treatments I already use? Does this include prescription and OTC medicines, vitamins, herbals, or other supplements, and other treatments?
- Should I avoid starting other medicines (prescription or OTC), dietary supplements (like herbals and vitamins) or other treatments while I am using this medicine?
- What are the possible side effects from this medicine? What do I do if I get a side effect?
- Is there any chance that I could become tolerant, dependent or addicted to this medicine? What can I do to avoid this?
- How and when should I use the medicine, in what amount, and for how long? Are there any special directions for using this medicine?
- Will I need any tests (blood tests, x-rays, other tests) to make sure the medicine is working as it should? How will I get the results?
- What should I do if I miss a dose? What should I do if I use too much by mistake?
- How and where should I keep this medicine? (Remember: Always put medicines out of the sight and reach of children and pets.)
- Where and how can I get more information about this medicine?

Remember: To reduce the risks of using medicines and to get the most benefit, you need to be an active member of your health care team.



U.S. Department of Health and Human Services



Food and Drug Administration

www.fda.gov/cder

1-888-INFO-FDA



Council on Family Health

www.cfhinfo.org

(FDA) 04-1503A

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Appointment Aide: Preparing for Your Appointment



Appointment Aide: Preparing for Your Appointment

Patients who are active members of their health care team are more likely to see their health conditions improve (following a hospitalization). This tool can help you be an active team member by preparing for your new health care appointment. It is yours to write in and carry with you when you see a new clinician.

Use this tool to help you speak up, ask questions, and let your team know what information you need to be prepared. Some people find it helpful to ask a care partner, such as a family member or friend, to come to the appointment and help with care. **You are the most important member of your health care team.**

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Before My Appointment

1. Why am I being referred somewhere else?
2. What concerns or questions are important to me? (For example, “I get short of breath walking up my stairs,” or “Should I take my insulin if my blood sugar is low in the morning?”)
3. What do I need to take with me to my new appointment? (This includes things like the after-visit summary, records, test results, or medicines.)
4. Which medicines am I taking now? (Use “My Medicine List” to keep track of your medicines, including over-the-counter creams, medicines, vitamins, and supplements.)
5. How am I getting to my new appointment?
6. Who do I want to go with me or help in my care? Did I ask for help?
7. Other questions:

During My Appointment

Bring this form to your next appointment. Make sure you ask these questions:

1. What do I need to know about my health condition(s)?
2. What can I do to improve my health?
3. Are there any changes to my current medicine list?
4. What problems should I look for, and what do I need to do if I have these problems? (Use “The Problems I Need to Look For” page to help you remember who to contact when you have these problems.)
5. Do I need any new health equipment or supplies? How will I learn to use them?
6. Do I need help with any of the following? Check the boxes next to the tasks you need help with, and share your answers with the health care team.

☐ Bathing

☐ Dressing

☐ Using bathroom

☐ Climbing/walking down stairs

☐ Food shopping

☐ Housecleaning

☐ Paying bills

☐ Getting to doctors' appointments

☐ Cooking

☐ Picking up or managing my prescription medicines

☐ Other: _____

My Medicine List

(As of _____)

My Allergies to Medicines _____

My **Regular Medicines** (**Bring this form to your next appointment.**)

Remember to include any over-the-counter medicines, vitamins, or supplements on the list.

Name (brand and generic)	Why do I take it?	Who prescribed this medicine?	When did I start taking this medicine?	How much do I take?	When do I take it?	Notes

Medicines I Need to **Stop Taking**

Name (brand and generic)	Why did I take it?	Why was it stopped?

The Problem(s) I Need to Look For

I should...	...if I have the following problem(s):
<input type="checkbox"/> Call 911 <input type="checkbox"/> Go to the nearest emergency room or clinic <input type="checkbox"/> Call _____ <input type="checkbox"/> Schedule follow-up appointment	
I should...	...if I have the following problem(s):
<input type="checkbox"/> Call 911 <input type="checkbox"/> Go to the nearest emergency room or clinic <input type="checkbox"/> Call _____ <input type="checkbox"/> Schedule follow-up appointment	

My Appointments

Date and time	Reason for appointment	Who will I see?	Address and phone number	Who referred me?	Specific instructions

My Health Care Team

My primary care doctor, nurse practitioner, or physician assistant:

Contact information:

My care partner (family or friend helping me with care):

Contact information:

Other team members:

Contact information:

Specialists I see regularly:

Contact information:

My support group:

Contact information:

Other team members:

Contact information:

My care coordinator/case manager/health coach:

Contact information:

My home health clinician:

Contact information:

Other team members:

Contact information:

My pharmacy:

Contact information:

My patient portal:
WEB ADDRESS

USERNAME

Other team members:

Contact information:

Notes

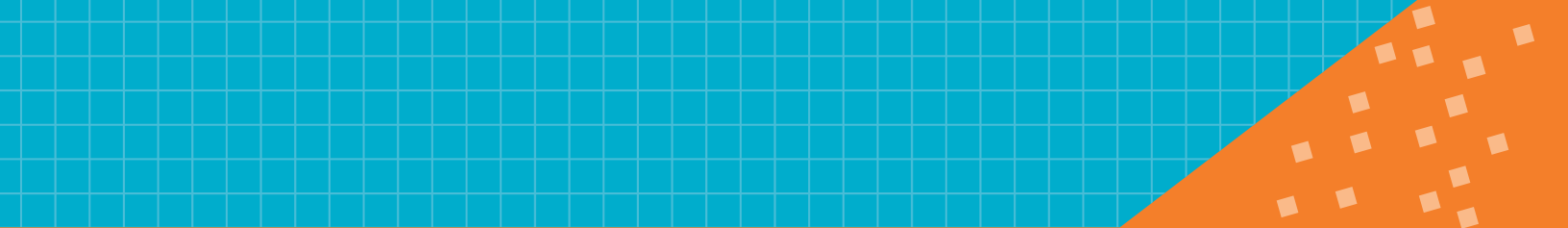
This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



Care Partner Questions

For the care partner (family or friend helping with care): Use these questions to help you and the team have the right information to support the patient. Please do not hesitate to speak up and ask questions.

1. What do I need to know about the patient's plan of care? (For example, when to take medicines, or when to follow up)
2. What can I do to help the patient? (For example, what is my role in helping the patient at home? How will I help at future appointments?)
3. What concerns do I have about helping the patient?
4. What resources do I need to provide help? (For example, training, home nurse visits, meal delivery)
5. Can I physically perform the tasks?
6. How will I take care of myself as a care partner? (For example, join a support group, hire someone to help provide care, make sure I am not ignoring my own health needs.)
7. What problems should I look for? Who should I contact if the patient has these problems?



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www.ahrq.gov


QuickTips

For Improving Your Health Care Experience

INTERACTING WITH YOUR HEALTH CARE TEAM

You can help yourself get the best results by being an active member of your “health care team.”

Your health care team includes:

- ➔ You!
- ➔ The doctor, physician assistant, nurse practitioner, or other professionals who prescribe your medicine or are in charge of your care.
- ➔ A nurse who helps you at home, a doctor’s office, or a hospital.
- ➔ The pharmacist who fills your prescription and can answer questions about your medicines. 

TIPS FOR INTERACTING WITH YOUR HEALTH CARE TEAM

- ▶ Write your questions down ahead of time.
- ▶ Keep a list of questions you want to ask your health care team.
- ▶ Take the list to your appointments.
- ▶ Give information. Don’t wait to be asked!
- ▶ You know important things about your symptoms and your health history. Tell your doctor, nurse or pharmacist what you think he or she needs to know.
- ▶ It is important to tell your doctor, nurses, and pharmacist personal information—even if it makes you feel embarrassed or uncomfortable.
- ▶ Bring a “health history” list with you, and keep it up to date. You might want to make a copy of the form for each member of your family.
- ▶ Be sure to write down what your health care team tells you about your medicine or treatment plan so you remember later.
- ▶ Bring a friend or family member with you when you visit the doctor. Talking over what to do with someone you trust can help you make better decisions.
- ▶ Try to use the same pharmacy so all your prescription records will be in one place.
- ▶ Keep a list of all the medicines, vitamins, and dietary supplements or herbs you take. Add new medicines to the list when you start taking something new or when a dose changes. Show the list to your doctor and the pharmacist.
- ▶ Make a copy of your list. Keep one copy and give the other to a family member or friend.
- ▶ If your symptoms get worse, or if you have problems with your medicine, call a member of your health care team.
- ▶ If you had tests and do not hear from your doctor, call for your test results.
- ▶ If your doctor said you need to have certain tests, make appointments at the lab or other offices to get them done.

“It is important to tell your doctor, nurses, and pharmacist personal information—even if it makes you feel embarrassed or uncomfortable.”

Source: Agency for Healthcare Research and Quality, www.ahrq.gov

The information contained in this medical self-care newsletter can be used to increase your personal awareness of how to manage minor health issues. If you have any questions or concerns about medical issues impacting you or your family, always contact your health care provider.



For more free resources, visit www.welcoa.org

17002 Marcy Street, Suite 140 | Omaha, NE 68118 | PH: 402-827-3590 | FX: 402-827-3594 | www.welcoa.org



EBCI TRIBAL OPTION

MEMBER BILL OF RIGHTS

Right to Considerate and Respectful Care

You have the right to:

- Expect that we will respect your dignity and privacy as you utilize our care, services and providers.
- Expect that we will respect your values and beliefs. We will support your beliefs as long as they do not hinder the well-being of others or your planned course of care.
- Be cared for and supported with respect without regard to health status, sex, race, color, religion, national origin, age, marital status, sexual orientation or gender identity.
- To report abuse, neglect, discrimination or harassment to any health care worker, manager, or executive director.

Right to Information

You have the right to:

- Obtain current and understandable information from physicians and caregivers regarding your diagnosis, treatment, and prognosis except in emergencies in which you lack decision-making capacity and the need for treatment is urgent.
- Discuss and request information related to specific procedures and treatments, including risks involved and reasonable alternatives, and to have the information interpreted, when necessary. You or someone you choose will have access to this information and interpreted as necessary, except when restricted by law.

Right to Decide or Refuse Treatment

You have the right to:

- Take part in planning your care and having an active role in the person-centered plan including refusal of treatment, supports or recommendations at any time.
- Be consulted if a doctor wants you to take part in a research program or donor program, and let you choose whether or not to do so. You will receive quality care and support whether you choose to take part or not.

Right to Privacy

You have the right to:

- Every consideration of privacy. Discussion of your care, consultations, examinations, and treatment will be conducted privately and discreetly. Individuals not directly involved in your care must have your permission to be present.

Right to Confidentiality

You have the right to:

- Expect that all communications and records pertaining to your care will be treated as confidential except in cases of suspected abuse and public health hazards when reporting is required by law.

Right to Reasonable Response

You have the right to:

- Obtain second opinions or request external assistance in accomplishing your care plan goals. You may include family, friends and advocates on your care team to assist you with understanding and addressing your identified care support needs.

Right to Continuity of Care

You have the right to:

- Reasonable continuity of care. You have the right to know in advance what appointment times and physicians are available.
- Expect that your providers and other support agencies will keep you informed of your continuing health care requirements following discharge.



EBCI TRIBAL OPTION

MEMBER BILL OF RIGHTS

Right to Advance Directive

You have the right to:

- An Advance Directive, such as a living will or healthcare power of attorney. These documents express your choices about your future care or name someone to make decisions if you cannot speak for yourself. A copy of the healthcare power of attorney will be required whenever that person is making decisions on your behalf.
- Receive information and assistance in the formulation of advance directives. You can receive this help by contacting your Primary Care Provider, Care Manager, or EBCI Tribal Option Member Services.

Right to Knowledge of Policies and Practices Affecting Your Care

You have the right to:

- Be informed of our policies and practices that relate to your care and services.
- Voice complaints and recommend changes without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment, and services.
- Be informed of resources for resolving disputes and grievances. If your concerns are not resolved with the EBCI Tribal Option, you may report them to the NC DHHS of Civil Rights.

Right to an Interpreter

You have the right to:

- An interpreter, translation services or other forms of communication if you do not speak English or if you have trouble reading or hearing.
- You have the right to a minister/spiritual advisor of your choice.
- You have the right to present your concerns, receive spiritual care, receive advice concerning ethical issues related to care, discharge planning, and money matters concerning care. You can also receive help with protection from abuse, discrimination and neglect. You can report your concerns to your Primary Care Provider, your Care Manager, or EBCI Tribal Option Member Services, or by visiting the EBCI Tribal Option website: www.ebcitribaloption.com

MEMBER RESPONSIBILITIES

- Provide correct and complete reports about your health.
- Let your doctor and care manager know if you do not understand the plan for your care and services or your role in that plan.
- Participate in your plan of care and services prepared by you, your PCP and your care team.
- Understand the fact that you may cause your health to become worse if you refuse treatment or do not follow your care plan.
- Report changes in your health and keep your appointments.
- Take into account the needs and feelings of other patients and members of your care team.
- Provide Advance Directives (Five Wishes, Living Will or Healthcare Power of Attorney) if you have one.

Rights and Responsibilities for Pediatric Members and their Families

In addition to the rights and responsibilities listed, the following rights and responsibilities apply to pediatrics patients (individuals under 18 years of age):

You have the right to:

- Receive timely reports about your care that you can understand.
- Emotional support.
- Your need to grow, play and learn.
- Make your own choices when you are able.

FAMILIES RESPONSIBILITIES

- Provide correct, complete reports about your child's health.
- Give your child the care he or she needs.
- Think about and respect the rights of other patients, families, and other members of the care team.