Trauma Patient Handbook

Inova Trauma Center – Fairfax





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A MESSAGE FROM THE INOVA TRAUMA ACUTE CARE SURGEONS

We hope you and your family find the information in this handbook to be helpful at this very difficult time. We recognize that traumatic events result in an immediate and unexpected disruption to your everyday lives.

During your stay, you will meet many doctors, nurses and other care team members. We know it can be confusing and overwhelming. In this guide, we explain how the trauma acute care surgery team works, those who may be involved in your care and the support programs available during your recovery.

We will design a comprehensive care plan to address your physical, emotional, and psychological injuries and needs. We encourage you to write down any questions you or your family might have. The nursing team is a great resource and can answer many of your questions about your care plan.

Every team member is dedicated to providing excellent care. It is important to us that we support you in any way we can as you work toward recovery.

NOW THAT YOU ARE HERE

Trauma is always unexpected. A sudden injury followed by hospitalization and recovery can cause anxiety, fear and frustration. You may feel confused and frightened by some of the things you hear and see. You may not understand some words people use. The experience of advanced medical care may be a completely new world for you. We hope this trauma patient guide will help you cope better during this difficult time.

We Are Here to Help

Every team member is here to help you. Feel free to ask for help finding your way around. All of our team members wear ID badges.

What Does It Mean to Be a Trauma Patient?

You are a patient of the trauma acute care surgery (TACS) service because you have traumatic injury. "Traumatic injury" refers to sudden and severe physical injuries requiring immediate medical attention. The length of your recovery depends on the extent of your injuries. It may take weeks, months or even longer for you to recover

completely. Your healing begins with us. Depending on your unique situation, you may continue recovering at home or in a specialized rehabilitation facility.

Wisdom from Trauma Survivors and Their Families

We asked our trauma survivors to share their insight and wisdom. Look for blue boxes like the one here to see what they shared.

SURVIVOR WISDOM

"Take notes. Ask a family member or friend to keep a journal of what happens during your hospital stay.

These notes may be interesting to you in the future."

YOUR CARE TEAM

Trauma Team

Trauma surgeons, also called trauma attendings, are fellowship trained and board certified in both general surgery and surgical critical care. Inova's trauma surgeons have vast experience in the management of serious traumatic injuries and focus on customized care for each patient. Trauma surgeons oversee the surgical and trauma intensive care unit (STICU), trauma intermediate care unit (TIMC), and TACS floor. There is a trauma surgeon in the hospital 24 hours a day.

One of our trauma surgeons is your main doctor, even if you do not have surgery. Your trauma surgeon will supervise and plan your care while you are in the hospital and will also act as the team leader for all of the experts who will play a part in your care.

A **fellow** is a surgeon who graduated from residency training and is going through further preparation in a selected specialty. Our trauma center sponsors a surgical critical care fellowship program. A **surgical resident** is a doctor who finished medical school and is in training to become a surgeon.

Physician assistants (PAs) and nurse practitioners (NPs)

work closely with the trauma surgeons to carry out your plan of care. Their duties may include conducting physical exams, diagnosing and treating conditions, ordering and interpreting tests, assisting in bedside procedures, and writing prescriptions, all while collaborating with the trauma surgeon.

The **Trauma Survivors Network (TSN) coordinator** is a trained and licensed mental health professional specializing in trauma and crisis counseling, guidance and education. The TSN coordinator works with hospitalized patients and families to normalize the trauma experience and meet emotional needs. After hospitalization, the TSN coordinator helps survivors expand and strengthen their network of social support and connection to other trauma survivors through peer visiting and support groups in order to foster a healthy and positive recovery experience.

Hospital Team

There may be other **consulting physicians**, also known as **specialists**, who assist in your care. They may provide recommendations and/or perform procedures and surgery. Some examples include **orthopedic surgeons**, **neurosurgeons**, **plastic surgeons** and **physiatrists** (rehabilitation doctors). Your trauma surgeon consults with the most appropriate specialists and coordinates the actions of those specialists.

A **registered nurse (RN)** is a licensed professional who graduated from nursing school. Your nurse is your primary contact and helps coordinate your daily plan of care. This individual is responsible for continual patient assessment and hands-on care. RNs wear **navy** scrubs.

A clinical technician (tech) has specific training to help the team with patient care. These duties include drawing blood, taking blood pressure, and daily patient support such as bathing and oral care. These team members wear bright teal scrubs.

Inova Fairfax Medical Campus (IFMC) is a teaching facility. We collaborate with regional medical, pharmacy and nursing schools to provide training. Sometimes **students** will be observers or involved in your care under the supervision of credentialed healthcare providers.

A **patient care navigator** assists patients and families in their ability to understand and meaningfully participate in the healthcare process – from diagnosis, testing and treatment to follow-up care. The navigator acts as a liaison and point of contact for clinical education, resources and expert guidance.

There is a **discharge planner/case manager** in each hospital unit to help you and your family plan for your care after you leave the hospital. Please ask any questions you have about the care you will receive after you are discharged. If needed, some of the following licensed professionals may be involved in your care:

A **respiratory therapist (RT)** aids with breathing treatments and administers medicine to help the respiratory system. RTs wear **grey** scrubs.

A physical therapist (PT) helps you strengthen muscles, improve coordination and learn new ways of getting around. Physical therapy helps the body recover from trauma. An occupational therapist (OT) helps you regain your ability to perform activities of daily living, such as getting out of bed, eating, dressing, using the toilet and bathing. These therapists wear Caribbean blue scrubs.

A **speech-language pathologist** works to improve language, memory, swallowing and feeding. A speechlanguage pathologist may also evaluate hearing. These therapists wear **teal** scrubs.

A nutritionist or dietitian teaches patients how food and health are connected. Based on your unique injuries and illnesses, they may help plan special meals for you. They may also give guidance on your nutrition after you leave the hospital. These team members wear **pink** scrubs.

Child life specialists are trained professionals dedicated to easing children's stress and anxieties during a hospital stay or outpatient procedure. They provide emotional support for families and encourage optimal development of children facing a broad range of challenging experiences, particularly those related to healthcare and hospitalization.

Spiritual care, also known as pastoral care or chaplaincy, is intended to facilitate healing by improving the well-being of patients and family members. Our professionally trained **chaplains** are available to help during times of crisis. There is also a **priest** available for Catholic patients. The chaplaincy office is open Monday – Friday from 8:30 a.m. to 5 p.m. On-call chaplains are also available for emergency assistance outside of these hours. Good communication is one of the most important parts of medical care. The trauma team works to communicate effectively with you, your loved ones and the many professionals involved in your care.

Who Is Responsible for Your Care in the Hospital?

While you will receive important information from a number of doctors, nurses and other team members throughout your stay, the **trauma surgeon** will give you the most precise and reliable information. Even if you do not have surgery, the trauma surgeon is still your main doctor and will work with other physician consultants, or **specialists**, to design a care plan. You may receive a lot of information throughout the day, but you can consider the trauma attending to represent the "final word" in your care.

When Will You See the Trauma Surgeon?

Every patient is important to us. Our goal is to provide focused, personalized care to every patient, every day. Even so, the nature of trauma care is often unpredictable. We appreciate your understanding and patience as we attempt to prioritize the complex needs of all our patients. Even though the **trauma surgeon** may not visit you at the same time each day, the trauma team works together to communicate with you and all members of your care team (residents, physician assistants and nurse practitioners).

Your Care Plan May Change

Remember, your medical condition will change, and we will adjust your care plan to meet your changing needs. The trauma team discusses the condition of each trauma patient every morning. When we meet together, each patient benefits from the expertise of all team members.

Assigning a Spokesperson

We consider your support system to be partners in your care. After all, they know you better than anyone else. It is possible they will have information that makes a difference in your treatment. We ask you to assign one person who can take the lead for your loved ones and who will communicate with the trauma team. Having one spokesperson allows staff to communicate with your family efficiently and effectively while focusing on caring for you. Remember, we cannot share your private medical information with anyone without your permission.

Family Meetings

On occasion, a family meeting may be necessary to help make serious or complex decisions about your treatment. It will involve you, your loved ones, the trauma team and other healthcare professionals. Arranging a family meeting usually requires 24-hour notice. If you would like to have a family meeting, tell a member of the trauma team.

SURVIVOR WISDOM

"Be patient with yourself. Your recovery may not always follow a 'straight line.' You may feel fairly good one day, then really tired and cranky the next. It can be frustrating to feel like you're losing ground, but you'll need to be patient and focus on your progress over time."

WHERE PATIENTS STAY WHILE IN THE HOSPITAL

After you are evaluated by the trauma team in the emergency department (**ED** or **ER**), you may require surgery and be taken directly to the operating room (**OR**). You will then be moved to the area of the hospital most appropriate to care for your injuries.

The **intensive care unit (ICU)** offers the highest level of care and monitoring for those who are severely injured. IFMC has various specialized ICUs (medical, neurosurgical, cardiovascular, pediatric), but you will most likely go to the **STICU**.

If your injuries are not as severe, you may be moved to an intermediate care unit (**IMC**) or a medical or surgical unit (sometimes called a **ward** or **floor**).

Patients move from one level of care to another only when the trauma team believes they are medically ready. The team does its best to notify spokespersons and loved ones before you are moved.

What to Expect Each Day

At the beginning of each shift (every 12 hours), or with any personnel change, you can expect your nurse and tech to:

- Introduce themselves
- Provide their contact information
- · Help you understand each day's care plan and goals
- Give medications and assist you with pain management
- Help keep you clean and comfortable

Our basic treatment format will help guide your daily care and ensure you are receiving high-quality, consistently safe care. No matter where you are in the hospital, you should experience the following:

- Hourly rounding A nurse or tech will check on you at least once every hour and address your needs. They will ask about your pain, changing position and toileting needs.
- Multidisciplinary rounds Your trauma surgeon will assess your progress daily and lead your team in care planning. A fellow, resident, PA or NP, and/or other providers may be with your trauma surgeon. You will also have unit leaders come by to make sure you are receiving excellent care.

 Communication – You will notice there is a dry erase board (often referred to as a "white board") in every patient room. This board helps with communication. Every day, the board will be frequently updated with important information including the names and numbers of your care team members as well as your pain and treatment goals. Feel free to use the white board as well. You can leave notes for the care team or write questions as you think of them.

As needed, other members of your care team (**specialists**, **therapists**, **nutritionists** and **discharge planners**) will see you to assess your progress or provide treatment.

SURVIVOR WISDOM

"By being part of the TSN, I can speak to new trauma survivors with authority. I can relate to them, maybe not fully, but maybe more so than their caregivers. I know what they have been through. I know the emotions, the joy of making progress in healing and the depression that often comes with setbacks. I can share my difficulties and my successes and perhaps offer hope that there can be life after trauma.

Today and for the future, I do have to manage occasional pains and discomfort because of the surgeries. I will always have reminders of what I've suffered through. I believe I could not have healed mentally without my fellow survivors. They don't have to imagine. They know exactly what I've been through." As part of your care plan, your trauma team will decide whether you need surgery. In many cases, surgery takes place a few days after you have sustained your injury. Either the trauma surgeon or one of the surgical specialists will perform your surgery.

Before surgery, you can expect:

- Your surgeon to explain how the injury will be repaired and what will happen before, during and after surgery.
- Your anesthesiologist to use your medical history to determine the most appropriate anesthetic. The anesthesiologist will describe their role during the surgery as well as the effects of anesthesia.

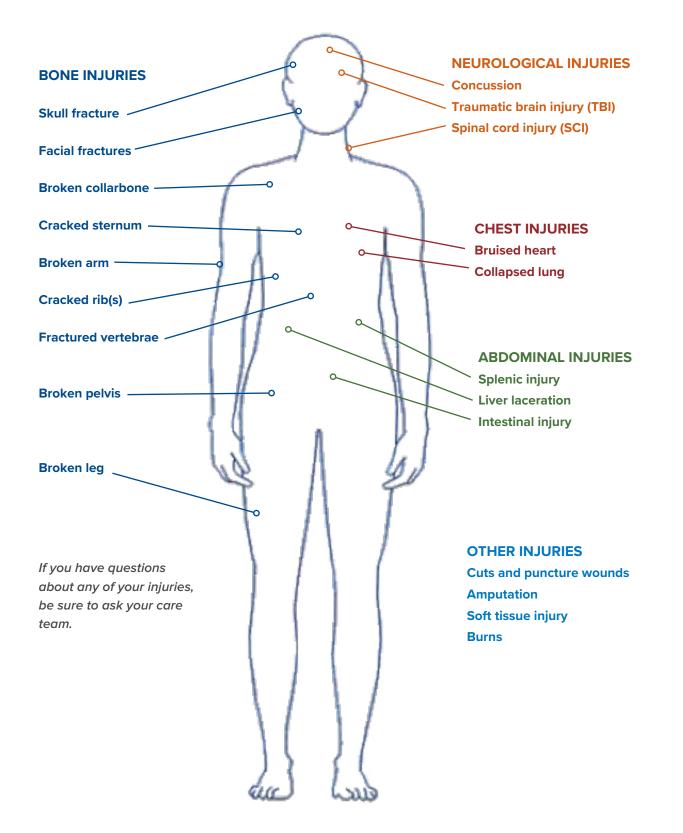
We strongly encourage you and your family to share your concerns with both your surgeon and anesthesiologist so you fully understand what to expect. Before surgery, you cannot eat or drink anything (called "NPO") to assure your safety during the operation.

OR schedules are subject to change. Be assured we do our best to keep you and your family informed of any surgery scheduling updates.

SURVIVOR WISDOM

"Ask for help. Being in the hospital disrupts every bit of your life: routines, schedules, relationships and plans. You are probably used to being very independent, but you now rely on other people for help. Your family and friends probably want to help out in any way they can. They only need your invitation."

COMMON TRAUMATIC INJURIES

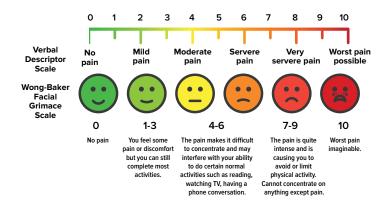


My Injuries: _____

Pain

After suffering a major injury, pain and discomfort are to be expected. Your trauma surgeon will work with you to create a personal pain management plan. To understand how severe your pain is, members of your care team will ask you regularly about your level of discomfort. They will work to decrease it to help you tolerate and continue your recovery.

Your nurse will take into account your specific level of communication to ensure the most accurate assessment. If you are unable to speak, there is a special exam used to measure your pain every hour. If you are awake, we may ask you to describe your pain on a scale of 1 to 10 using a chart like the one below.



Pain medication can come in pills, topical agents, injections and/or intravenous (IV) medications. There are also ways of managing pain that don't require medicine, such as heat, cold, music therapy and repositioning.

Because pain adds stress to your body as it tries to recover, it is important to take your pain medicine as directed. Without good pain control, it is difficult to participate in other parts of your recovery. This includes moving, coughing, deep breathing, eating and drinking. Although the pain is not likely to go away completely, we will work to get it to a manageable level. If you ever feel your pain is not under control or is increasing, please tell your nurse or doctor right away.

While you're in the hospital, have a frank discussion with your doctor about pain control when you leave the hospital. Ask your surgeon or your care team about the ongoing plan for pain management as part of your recovery. Remember to "get ahead of the pain" and stay ahead of it for best results.

Moving Around

Getting up and moving as soon as possible helps you recover faster. It strengthens your muscles, improves your balance and sharpens your brain. It also helps prevent pneumonia or other complications. Even though you may not feel ready, getting up and moving helps you in many ways. Your doctor will let you know when you should start moving and how often.

Coughing and Deep Breathing

Keeping your lungs open and clear is very important. To help your lungs expand and to prevent pneumonia, it may be necessary for you to cough and breathe deeply at least every two hours. You may also be given an incentive spirometer to use both in the hospital and at home. Your nurse or a respiratory therapist will teach you how to exercise your lungs. You can help your recovery by remembering to cough and breathe deeply whenever you can and by using the incentive spirometer as instructed.

Eating and Drinking

Your ability to eat or drink depends on many factors, including the type of injury or surgery you had, the medications you're taking, whether you have nausea, and how well your stomach and bowels are working. Once you are cleared to eat and drink, you will begin slowly. Your care team will have a plan for when you can add more foods. It is important to understand that your safety is the primary factor in advancing your diet.

Medications

You may receive medications to help in your recovery. These may include antibiotics and medication to prevent blood clots from forming. Anesthesia, prolonged bed rest and pain medications might affect your ability to move your bowels. Once you resume eating, your doctor may order a medication to prevent constipation or straining during a bowel movement.

SURVIVOR WISDOM

"Don't be afraid to ask for pain medicine, but keep in mind that...your nurse must get your doctor's OK before you receive any medications."

BEING RELEASED FROM THE HOSPITAL

Each person, injury and path to recovery is different. How long you stay in the hospital depends on the extent of your injuries and your recovery process.

In general, you will leave the hospital when you are medically stable. However, the discharge process actually begins shortly after you enter the hospital. Feel free to ask your team how long your expected length of stay is. Your plan is always subject to change, so be sure to ask often for updates.

Where you go after discharge will depend on your injuries and recovery plan. Your care team and discharge planner will help you determine the level of care you need. Your team will help you and your loved ones coordinate the transition from one setting to the next.

Before you leave the hospital, you will receive detailed discharge instructions about follow-up care. Please take as much time as you need to carefully go over the discharge information with the team. Ask any questions about your aftercare *before* you leave.

Home

When discharged, you will go home from the hospital if it is safe for you to continue recovering there. It is important to follow the discharge instructions given to you, including making appointments. You should continue to take your medication as directed.

Outpatient Care

If you need continued therapy but are well enough to go home, we will give you a prescription for outpatient care. The prescription is a doctor's order for the type of care you need while living at home. You should make your own appointments for the prescribed follow-up care. Your providers will adjust your therapy as needed to restore function little by little.

Home Care

If you have ongoing rehabilitation needs and cannot get to an outpatient therapy facility, a home health agency may send therapists or nurses to your home. They can help you continue your therapy and teach your family how to care for you at home. Patients who go home from a rehabilitation hospital or skilled nursing facility may also have home therapy.

Inpatient Acute Rehabilitation

If you require a high level of care after leaving the hospital, your care team may transfer you to an acute rehabilitation hospital. There, a skilled care team will develop an individualized plan of care to help you regain movement and independence.

Skilled Nursing Facility

You may be moved to a skilled nursing facility because you need less medical supervision but are not able to return home yet. There, you will begin to regain the strength and function you had before your injury.

Follow-Up Visits

No matter where you go, you may still need regular followup visits with your surgeon or specialists. Your discharge instructions will have details on who you should see and when. Follow-up visits are important so your providers can continue prescribing medication and make sure you are healing properly. It is helpful to keep a journal or notebook to write down questions you have for your providers so that you can ask them at your appointments.

SURVIVOR WISDOM

"Plan ahead. Your discharge from the hospital may come more quickly than you expect, even before you feel really ready to go. The best way to be ready is to make plans early. Ask your nurse about what kind of help is available to arrange for rehab, home care, equipment or follow-up appointments. You may find you need other equipment or devices after you return home. Don't panic! Your home care provider or doctor's office can help you once you are home."

"Physical therapy can be very important. Muscles weaken very quickly, and any activity that you can handle will help you recover more quickly. Try to arrange for pain medication about 30 minutes or so before you have physical therapy. If you do this, your therapy won't hurt so much, and you will be able to do more and make more progress."



The **TSN** is a community of patients and families like you. They are looking to connect with one another and rebuild their lives after a serious injury. Joining the TSN can help ease the anxiety and frustration often experienced following a sudden injury.

Some of the benefits of taking part in the TSN include:

- Connecting with others in similar situations and sharing your experiences
- · Learning about injuries from trauma experts
- Discovering how to meet the challenges of everyday life after injury
- · Giving hope and inspiration to others

Peer Visiting and Community Presentations

Sometimes you need to speak with someone who's "been where you are."

Learning from others who have experienced trauma can be helpful. In the **peer visitor** program, trauma survivors visit patients and families, share recovery experiences, and encourage new survivors to move forward. TSN volunteers offer the kind of support only a fellow trauma survivor can provide. Peer visitors receive hospital training as volunteers and specialized training with their **TSN coordinator**.

Trauma survivors also present their stories of recovery to healthcare professionals. These presentations enhance the understanding of the trauma experience and increase the ability to address the emotional needs of trauma patients. Community presentations give healthcare providers and trauma survivors an opportunity to learn from one another.

Education and Support

In recovery, patients and families often need more than medical care.

Traumatic injury touches patients and families in many ways. No one can anticipate the physical, emotional, social or financial issues you may face following trauma. The TSN hosts support groups where survivors and their families can share experiences and resources and inspire one another. TSN support groups help survivors understand that they're not alone in their recovery.

Most of the programs take place at IFMC, but ask your TSN coordinator for location information. Participation and parking are free.

TSN team members at IFMC offer educational workshops and other special events throughout the year. We focus these gatherings toward educating healthcare workers and promoting recovery from trauma for survivors.

TSN Website

traumasurvivorsnetwork.org

The TSN website provides a place for you and your loved ones to connect with others and get information you need to help rebuild your life.

Once you join the TSN and sign up with your trauma center, you have access to the following:

- An online community where trauma survivors and their families share experiences and information as well as provide support and hope to one another
- NextSteps[™] online, a six-week recovery class led by a trained professional that is designed to help survivors manage and cope with life after serious injury
- The *Traumapedia*, an online resource where you can learn about trauma care and rehabilitation
- Information about TSN programs and events that may be available through your trauma center

Programs and services provided by the TSN are completely free of charge and open to any trauma survivor and family member/caregiver.

To learn more about programs, workshops or support groups, or to arrange a peer visit, please contact the TSN coordinator at **703.776.4930** or **shira.rothberg@inova.org**.

Ask Questions and Stay Informed

Listen carefully to your medical team. Ask them questions until you understand the diagnoses and treatment options. It is okay to ask the same question twice.

Stress makes it hard to absorb and remember unfamiliar information. Write down what your providers tell you as soon as possible. Having notes you can read later helps you share information with your loved ones.

Visitors Are Important

Visiting is a time to be with your loved ones and for them to ask questions. Research shows that comforting visits help patients heal. Visiting is also a good time for your support system to begin learning how to take care of you at home.

Remember, it is important for visitors to take care of themselves. It is critical that your friends and family go home at regular intervals. Rest lets caregivers improve their ability to care for you. Keep in mind that you will also need time to rest so you can heal. The healthcare team may have special requests for visitation limitations when a patient is unstable, is having a procedure or requires a limited number of visitors because of the severity of the patient's illness.

Children are not restricted by age on many units; however, the emotional impact of seeing a critically ill patient should be considered. Children should be prepared for the hospital environment and the patient's illness as appropriate.

SURVIVOR WISDOM

"Get involved in your treatment. You have the right to know about your options and to discuss them with your doctor. If you are told you need a certain test, feel free to ask for an explanation of the test and what that test shows."

FREQUENTLY ASKED QUESTIONS

If you have any other questions while in the hospital, please ask any member of your team. After leaving the hospital, you will find answers to many of your questions by reading over your discharge instructions.

Smoking

I am a smoker. Does smoking have any effect on healing? Yes, smoking can slow the healing process. Ask your team for information on how to quit.

Home Medication and Pain Management

How long do I need to take medication?

The length of time depends on the type of medication you are taking. Continue to take your medication as prescribed until you have consulted with the doctor who prescribed it. You can also talk with your primary care provider (PCP). Stopping your medication too early can result in adverse reactions, including rehospitalization.

Because your pain may steadily decrease as you heal, you should take pain medication only when needed. Remember that pain management is important because pain can prevent you from moving, eating and sleeping, all of which are important to your recovery.

There are also ways to manage your pain without medication. Pain management methods can include time outside in the sunshine, yoga, meditation, rhythmic breathing, aromatherapy, laughter and music. These methods take time and practice to be effective. Therefore, it is important to start using them before you are completely off your pain medication. Remember, each person may respond to these therapies differently.

Acute Rehabilitation Center/Skilled Nursing Facility/Home Care Agency

How does the rehabilitation hospital, skilled nursing facility or home care agency know about my injuries and my trauma surgeon's plan?

Before you leave IFMC, your care team will write a referral for the next group of caregivers. It will include your medical history, medications, therapy plan and any restrictions (e.g., reduced weightbearing on a leg).

Will my surgeon continue to manage my care during my rehabilitation?

If you go to a rehabilitation hospital or skilled nursing facility, a doctor from that facility will oversee the plan established by your trauma surgeon.

Follow-Up Care

When should I see my doctor?

Please review your discharge instructions so you know whom you should follow up with and when.

When and how will my sutures/staples be removed?

A healthcare professional at the surgical clinic typically removes sutures and staples at the first postoperative visit. The surgeon will examine your incisions or traumatic wounds and update your plan of care.

What do I do with all of my insurance and disability forms?

The care team completes these forms on your behalf. You will complete the patient sections and sign where applicable. You will then send your completed insurance, disability or transportation forms to your trauma surgeon's office. Please allow one to two weeks for processing.

Can I apply for a handicap placard or license plate?

Contact the Department of Motor Vehicles to request a handicap placard/plate form. After filling out the patient information section, bring it with you to your first follow-up visit at the trauma clinic or your PCP's office.

Letters for Employers, Schools and Others

What do I do if I need a letter regarding this hospitalization?

You might need a letter to send to employers, schools or other official entities to inform them that you or your loved one is in the hospital. If you are still in the hospital, let your discharge planner/case manager or care team know you will need a letter. After discharge, you should contact your doctor's office to obtain a letter.

Insurance

Figuring out insurance for trauma patients can be very complex. If you have questions about insurance, you do not have insurance or you need financial assistance with your hospital bill, you can speak with one of Inova's financial coordinators by calling **703.776.6019**.

Medicaid

To apply for Medicaid, contact the Virginia Department of Social Services (DSS) in the city or county where you live by visiting **medicaid.gov**.

If you meet the guidelines, you may start your application for Medicaid or have it started for you during your hospital stay. If you have questions about the application process, talk to the discharge planner involved with your care. You can also speak with one of Inova's financial coordinators by calling **703.776.6019**.

Disability Payments

Payments to help a patient through long-term or short-term disability come from different sources, but most of them come from work benefits or insurance. You or your family members are responsible for applying for these payments through the workplace or insurance company that offers them.

Social Security

Social Security pays benefits to people who cannot work because they expect their medical condition to last at least one year. You can use the Social Security website (ssa.gov) or you can call **1.800.772.1213** to apply for Supplemental Security Income. It takes many months to process an application, so it is a good idea to get started early.

SURVIVOR WISDOM

"Get a person's name at your insurance company and try to always talk to that person. The social worker or case manager at the hospital may be able to help you find this person. It is easier for you and easier for the insurance person, too. Having someone who knows your case can be very helpful when the bills start rolling in."

Virginia DSS

Contact DSS to apply for Medicaid and gain information on other types of state-funded assistance.

Arlington: **703.228.1350** Fairfax County: **703.324.7500** Loudoun County: **703.777.0353** Manassas City: **703.361.8277** Prince William County: **703.792.7500**

MetroAccess

MetroAccess provides curb-to-curb transportation service for people with disabilities through the Washington Metropolitan Area Transit Authority. For information on eligibility, service area, or booking a trip and fares, contact MetroAccess at **301.562.5360** (voice) or **301.588.7535** (TTY) or visit **wmata.com**.

Community Service Boards (CSBs)

CSBs are county-operated facilities that offer access to the publicly funded system of services for mental health, intellectual disability and substance abuse.

Alexandria City: **703.746.3523** Arlington County: **703.228.5150** Fairfax County/Falls Church: **703.324.7000** Loudoun County: **703.777.0377** Prince William County Sudley North: **703.792.7800** Woodbridge: **703.792.4900**

Free Health Clinics

Arlington County: **703.979.1400** Fairfax County: **703.237.3446** Loudoun County: **703.779.5416** Prince William Area: **703.499.9034** Caroline, Fredericksburg, King George, Spotsylvania, Stafford: **540.741.1061**

Inova Transitional Services

Inova Transitional Services was developed to bridge gaps in care that patients experience as they transfer across care delivery settings between illness and recovery. The service focuses on care coordination and community collaboration to improve health outcomes of patients at the highest risk who lack access to needed resources.

Inova's transitional care management program focuses on traditional Medicare/Medicaid, Innovation Health, Medicare Advantage and uninsured patients with chronic illnesses, in particular those with heart failure, chronic obstructive pulmonary disease, pneumonia and diabetes.

Inova Transitional Services has clinic locations in Alexandria, Fairfax, Herndon and Leesburg. Call Inova Transitional Services at **571.623.3360**.

Inova Pharmacy

IFMC has an onsite pharmacy located near Inova Heart and Vascular Institute. It is a full retail pharmacy with competitive pricing. All major insurance plans are accepted. Prescriptions can be sent down to the pharmacy to be filled while you wait for discharge. You can also come back to the hospital after discharge to fill any prescriptions.

Needy Meds

needymeds.org provides assistance with costs of medication and healthcare.

Brain Injury Services (BIS)

BIS offers community-based resources and case management at no cost to children and adults who have acquired a brain-related injury. You can reach them at **703.451.8881** or **braininjurysvcs.org**.

Our team has compiled this list of helpful resources as a service to you and your family. We are not responsible for the information at the linked sites and do not endorse any products or services found there. Visit **inova.org/trauma** for links to more resources.

QUESTIONS YOU SHOULD ASK

Below are a few questions to help you stay well informed. Feel free to write down other questions. We are happy to answer all of them.

What are my injuries and diagnoses? (page 7)

How will each injury be treated, and by whom?

Who are my doctors, and who else is involved in my care? (pages 2 – 3) _____

What kind of recovery can I expect?_____

When do I leave the hospital?_____

INOVA FAIRFAX MEDICAL CAMPUS MAP



For the most current information regarding IFMC valet services, please visit **inova.org/visitfairfax**.

IFMC is a nationally recognized medical and surgical center serving the Washington, DC, region. The campus consists of four hospitals: Inova Fairfax Hospital, Inova L.J. Murphy Children's Hospital, Inova Women's Hospital and Inova Heart and Vascular Institute. We consistently rank among the top healthcare providers in the United States.

The Inova Trauma Center is Northern Virginia's only Level 1 Trauma Center. Level 1 designation is assigned to centers that provide the highest level of care 24 hours a day for every aspect of injury, from prevention through rehabilitation. The Commonwealth of Virginia has continually designated the Inova Trauma Center as a Level 1 Trauma Center since 1983. Additionally, the American College of Surgeons has continually verified our program since 1993.

Our trauma surgeons and trauma team are available around the clock, 365 days a year to treat life-threatening injuries.

IMPORTANT PHONE NUMBERS

Billing Questions	571.423.5750
Financial Quality Coordinator	703.776.6019
Information Desk	703.776.4001
Lost and Found	703.776.3180
Medical Records	703.776.3307
Pharmacy (IHVI)	703.776.8250
Trauma Acute Care Surgery	703.776.7300
Surgical and Trauma ICU	703.776.3274

Inova General Surgery – Falls Church

6565 Arlington Blvd., Suite 500 Falls Church, VA 22042 Telephone: **703.531.2246** Fax: **703.237.7895**

Inova Trauma Administrative Offices

Inova Fairfax Medical Campus 3300 Gallows Rd. Original Building, 2nd Floor Falls Church, VA 22042 Telephone: **703.776.2274** Fax: **703.776.3572**

Visit inova.org/trauma for more information and resources.



Inova Trauma Center

Inova Fairfax Medical Campus 3300 Gallows Rd. Original Building, 2nd Floor Falls Church, VA 22042 **inova.org/trauma**