



PREFACE

Cancer is a frightening and unknown territory for most of us. Hearing the diagnosis can easily send us into despair, even if we are Christians and know that God is in control.

Anytime we plan a trip, we gather information. We talk to friends who have been there. We research the place on the internet. We gather lists of recommended things to do along the way. We consult maps and look for road signs that tell us when to turn and what to expect.

Cancer is a trip that none of us wish to take, but having a roadmap of resources and advice from others who have traveled that way can make the journey easier. Suggestions from fellow travelers can reduce the burden of the unknown by providing information they have gathered on their road to recovery.

The Cancer Support Group at Sky View Missionary Baptist Church consists of cancer patients, survivors, caregivers, family and friends. They have walked the road. They know the challenges and hurdles of the system. They understand the medical, emotional, physical and spiritual strains that cancer causes. They have been there. They understand and they care.

This Resource Manual is their gift to you: a compilation of resources to help you with your plan for recovery. Through these pages, the support group members will be walking beside you. They also want you to know that there is someone who is able to reach out and comfort you in a way that is eternal. The Bible tells us that Jesus came to give us life. Not only life here on earth but also eternal life in heaven with God.

If you are unsure what it takes for a person to go to heaven and have eternal life with God, I've included a "faith outline" in this directory. This outline is an acrostic with the letters from the word F.A.I.T.H. and it simply explains God's desire to have your name in the book of life, how to turn from sin and how to accept the gift of salvation.

If you would like to learn more about Jesus, I invite you to talk to your local pastor. I would also welcome the opportunity to speak with you. You may contact me at:
Sky View Missionary Baptist Church
129 Sky View Drive, Fancy Gap, Virginia 24328
Phone: 276.728.2211

Our prayer at Sky View is that God will use this Resource Manual to help you on your journey.

Sincerely,

Pastor Wendell Horton

F.A.I.T.H

“F” is for forgiveness.

Romans 3:23 “All have sinned and fall short of the glory of God”

Everyone has sinned and needs God’s forgiveness. God’s forgiveness is by Jesus only.

Ephesians 1:17 “In Him we have redemption through His blood, the forgiveness of our trespasses.”

“A” is for available. God’s forgiveness is available for all, but not automatic.

John 3:16 “God loved the world in this way: He gave His one and only son, so that everyone who believes in Him will not perish but have eternal life.”

Matthew 7:21 “Not everyone who says ‘Lord, Lord’ will enter the kingdom of heaven.”

“I” is for impossible. It is impossible to get to heaven on your own.

Ephesians 2:8-9 “By grace you are saved through faith, and this is not from yourself. It is God’s gift, not from your own works, so that no one can boast.”

“T” is for turn. Turn means to change direction. Repent and turn away from sin.

Luke 13:3 “Unless you repent, you will perish as well.”

Turn to Jesus alone as your Lord and Savior.

John 14:6 “I am the way, the truth and the light. No one comes to the Father except through me.”

Romans 10:9-10 “If you confess with your mouth that ‘Jesus is Lord’ and believe in your heart that God raised Him from the dead, you will be saved. With the heart one believes resulting in righteousness, and with the mouth one confesses resulting in salvation.”

“H” is for heaven, the place where we will live with God forever.

John 14:3 “If I go away and prepare a place for you, I will come back and receive you to myself so that where I am you may be also.”

John 10:10 “I have come that they may have life and have it in abundance.”

INVITATION

By trusting Jesus as your Lord and Savior, you can have God’s forgiveness, eternal life and heaven. If you understand and accept this invitation, then contact your local Pastor. If you do not have a local Pastor then you are welcome to contact Wendell Horton, Pastor of Sky View Missionary Baptist Church,
129 Sky View Drive
Fancy Gap, Virginia 24328
276.728.2211

I accept this invitation.....

My name is.....Date.....

Name of witness.....

INTRODUCTION

MISSION STATEMENT

Our mission is to help cancer patients, survivors, family members, caregivers and friends maintain the best possible quality of life through all stages of treatment and care. Experience has shown that attending to the medical, psychological, emotional and spiritual areas of life are very important to maintaining balance. The ability to relax and think straight in the midst of uncertainty can promote healing for all who are involved.

THE GOALS OF THIS RESOURCE MANUAL

There are several goals. Some pages provide basic information about cancer and its treatment. Other pages provide guidelines for maintaining your quality of life. Additional pages give you an opportunity to check where you stand on a variety of issues. You may photocopy pages and update information. You may add other questions or comments. You may insert additional pages as you journey down the path to recovery. This **RESOURCE MANUAL** is yours to use and we hope that our goals help to serve your needs.

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 - Patient Resource Guide (free subscription)
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10 THINGS YOU SHOULD KNOW ABOUT CANCER

1. **What type of cancer do I have?** Your doctor will diagnose your cancer and most likely will give you some information about the type. This is a starting point for your journey. You will have many questions and will need additional information. There are many publications available and internet research will guide you to find more complete information.

2. **Where should I seek treatment?** You should go to a specialized cancer treatment center to get the best possible care. Cancer treatment centers may be freestanding or they may be affiliated with a community hospital or an academic medical center such as the cancer center at Wake Forrest Baptist Hospital in Winston-Salem, North Carolina. For additional information, refer to the page in this RESOURCE MANUAL titled, “Which Treatment Facility is Right for You?”

3. **How many cancer specialists will need to be involved in my care?** You will need a team of cancer specialists to diagnose and treat you. The number of doctors, nurses and other health care professionals will vary depending on the type of cancer and the treatment methods. For additional information, refer to the pages in this RESOURCE MANUAL titled, “Questions to ask your medical oncologist” and “Meet your Team”.

4. **What are my treatment choices?** Your team of cancer specialists will study the test results and then recommend the best treatment choices. Some of your choices may include surgery, chemotherapy, radiation or some combination. For additional information, refer to the pages in this RESOURCE MANUAL titled, “Seeking a second opinion” and “Making medical decisions.”

5. **What is a clinical trial?** The main purpose of a clinical trial is to find a better way to prevent, or diagnose, or treat a cancer. Clinical trials are a part of a long, careful research process. Many clinical trials evaluate new drugs or procedures. Your medical oncologist should be able to provide information about clinical trials related to your cancer. Also check the internet to find more about this subject.

6. **Should I get a second or third opinion?** One of the best things you can do for yourself is to seek an opinion from another qualified cancer specialist. Confirmation of the original diagnosis and treatment plan may be comforting. CAUTION. Once you have accepted the diagnosis and treatment plan, DO NOT change your mind. It is very important that you stay with one treatment plan under the direction of one doctor. Changing plans and treatments and drugs and procedures may delay or even prevent recovery.

7. **What resources are available?** One thing is certain. You will need support from family, friends and others to help you get through the emotional and financial challenges as well as the everyday practical concerns related to cancer diagnosis and treatment. We hope this RESOURCE MANUAL helps to meet your needs.

8. **Are there support groups for people with my type of cancer?** Support groups offer you the chance to talk with others and share knowledge. Visit web sites that provide information and check with the American Cancer Society and local churches for groups in your area.

9. **Will diet and exercise help?** Proper nutrition and exercise will help you get through your treatment and improve your health. This RESOURCE MANUAL includes several pages on diet and exercise because they are very important to your recovery.

10. **How can I learn to be an active participant in my care?** You may not know what questions to ask or what resources are available or where to begin. This RESOURCE MANUAL can help you become active. You need to make decisions and be in charge of your care.

WHICH TREATMENT FACILITY IS RIGHT FOR YOU?

If you have been diagnosed with cancer, you have many decisions to make. Which facility will you use for your treatment? To help you decide, rank the features listed below that are important to you. (1 = important, 10 = not important).

- Appearance
- Available testing
- Reputation
- Quality indicators (infection rates, medical errors)
- Clinical trials
- Convenience (travel time)
- Technology (new equipment and procedures)
- Educational resources (library)
- Ethics consultations (end-of-life decisions)
- Caregiver support (training)
- Financial consultation (locate assistance)
- Inpatient/outpatient (options)
- National ranking
- Nursing staff reputation
- Palliative care
- Patient advocate (liaison between you and the facility)
- Personal recommendation
- Religious services
- Social/mental health counseling
- Facility specializes in your type of cancer
- Support groups
- Timely treatments
- Translations and TDD services (non-English services)

MEET YOUR TEAM

The nature and extent of your cancer will determine the members of your TEAM. Each member has a specialty. Remember that you are the TEAM leader and make all of the final decisions. Some of the professionals which you may have on your TEAM include the following. It's important that you understand their role so that you can take full advantage of their skills and the personal attention that they may provide. Some of the possible TEAM members are listed below. This is a place to fill in their names and contact information (such as phone number) for future reference.

- () Medical oncologist.....
- () Radiation oncologist.....
- () Pathologist.....
- () Surgeons.....
- () Oncology nurses.....
- () Nurse practitioners.....
- () Physicians.....
- () Assistants.....
- () Social workers.....
- () Clinical pharmacists.....
- () Dietitians.....
- () Occupational therapists.....
- () Physical therapists.....
- () Clergy.....
- () Psychologists.....
- () Psychiatrists.....
- () Drivers.....
- () Volunteers.....
- () Others (caregivers, relatives, co-workers)

MEDICAL DECISIONS

Six steps for handling the stress of choosing cancer treatments.

Fill in the blank spaces and check each STEP when it's completed. As a general rule, the more information you have, the easier it will be to make a decision.

STEP #1. Learn all that you can about your treatment options.

() List the treatment options which are best for you.

.....

STEP #2. Learn about the trade-offs.

() List the pros and cons of each option.

.....

.....

() Search for quantitative information for each option (such as success rates).

.....

() What are the chances of recurrence after 5 years?

.....

STEP#3. Search for information about options.

() Check medical journals and web sites.

.....

.....

STEP#4. Be skeptical. Are the sources of your information credible?

() Who sponsors the web site?

.....

() Did the patients have the same cancer as you?

.....

() How many patients had successful treatment (1 or 1000)?

.....

STEP #5. Think about the meaning of each option?

() Will you base your decision on your age or some other factors?

.....

() Are you willing to endure some pain for a short while?

.....

() Are the life changes acceptable to you?

.....

STEP #6. Be confident about your decision.

() Will you change your mind if there is some uncertainty?

.....

() Seek confirmation from your family, caregivers and supporters.

.....

QUESTIONS to ask your MEDICAL ONCOLOGIST

Check each question when completed and write your answer in the blank space.

Name of your Medical Oncologist.....

TREATMENT

- What kind of treatment will I receive?
- What is the schedule for the treatments?
- How long will I receive treatments?
- How long will each treatment take?
- Where will I receive the treatments (office, clinic, hospital)?
- Will other tests be given before/during treatments?
- May someone be with me during treatments?
- Will I feel like driving home or should I have a driver?
- What written information will I get about my cancer?

PREPARING FOR TREATMENTS

- May I eat before treatments?
- May I take vitamins and/or herbs?
- What kind of skin protection should I use?

AFTER TREATMENTS

- What restrictions will I have?
- What side effects might I have (nausea, fatigue, sleep disorders)?
- May I get medications to treat side effects?
- How are results evaluated?

MEDICATIONS

- What are the names of the drugs?
- Are drugs given by (mouth, vein, patch)?
- Will I need a port to receive I.V. medications?
- May prescriptions be renewed?
- Will there be any drug interactions?
- What are the drug side effects?

.....

LIFE CHANGES

- What physical changes might I expect?
- May I continue my usual work/exercise schedules?
- Additional questions?

QUESTIONS to ask your RADIATION ONCOLOGIST

Name of your radiation Oncologist?

- How many treatments will I get?
- How long will the "mark up" visit take?
- How should I clean/wash myself after being marked?
- May I use skin lotions, deodorants when marked?
- What side effects may I expect?
- How will results be evaluated?
- What is the follow up plan for the future?
- Additional questions.....

PERSONAL PROFILE of CANCER PATIENT

Caregivers may come and go but treatments should continue unchanged. One way to help maintain constant treatment is to complete the following PROFILE.

Name First..... Middle..... Last..... Nick name.....

Address.....

County.....City.....State.....Zip code.....

Phone :Cell.....Home.....Work.....Other.....

Email

Name of Doctor.....Phone #.....

Name of Clinic.....Phone #.....

Name of Hospital.....Phone #.....

Name of Pharmacy.....Phone #.....

Name of Driver.....Phone #.....

List regular appointments:

Doctor/Date/Time.....

Doctor/Date/Time.....

Doctor/Date/Time.....

(attach a new page if needed)

Medications:

Name	Time	with/without food	renew subscription
.....
.....
.....

(attach updated list when needed)

Favorite foods.....

Favorite meals.....

(attach recipes if needed)

List all food and drug allergies.

.....

Favorite snacks.....

Meal times: Breakfast.....Lunch.....Dinner.....Snacks.....

Rest periods: Morning.....Afternoon.....Evening.....

Bedtime.....Awake time.....

Favorite Music (attach list if needed).....

Favorite Hymns (attach list if needed).....

Favorite TV shows and Movies (attach list if needed).....

Favorite photos (where are they kept).....

Other Favorites (card/table games)

Name of close family member.....phone
#.....

Name of close friend.....
phone#.....

Name of close coworker.....phone
#.....

Other favorites:

Chair.....Blanket.....pillow.....bible.....quiet
time.....

Personal interests.....

Hobbies.....

Favorite

trips.....

Pet(s).....Name(s)

Pet responds to what commands? (sit, down, stay)

Where is pet food kept?

When is pet

fed?

Where does pet sleep?

Who cares for the pet?

What meds (if any) does the pet take?

Which Vet. Clinic is used?

Who can care for the pet(s) in an emergency?

EMERGENCY PHONE NUMBERS

Fire.....

Police.....

Ambulance.....

Power failure.....

Other services:

Name/number of company who delivers (fuel oil) (propane)?

Name/number of person who cares for lawn/garden?

Name/number of persons who do house cleaning/laundry/auto service?

PATIENT BILL OF RIGHTS

I have the right:

01. to have cultural, spiritual and personal belief respected.
02. to have respectful care by competent personnel with regard for personal dignity.
03. to have impartial access to resources.
04. to communicate in a language that I understand.
05. to get a full explanation of all treatments and outcomes.
06. to be informed of facility rules and regulations.
07. to be informed about to nature, risks and alternatives of all procedures.
08. to participate in the plan of care.
09. to be educated about pain and pain management.
10. to be provided access to spiritual care.
11. to expect my personal privacy to be respected.
12. to request a discharge planner covering follow up health care.
13. to participate in applicable clinical training programs.
14. to receive an explanation of the bill regardless of the source of payment.
15. to expect rights to be extended to authorized representatives.
16. to have a family member notified of my admission to the hospital.
17. to have unrestricted visitation privileges.
18. to receive care in a safe setting free from all forms of abuse.
19. to be free from restraints that are not medically necessary.
20. to have access to all information in my medical record as allowed by law.

PERSONAL PROFILE OF CAREGIVER

Cancer patients need a certain level of care. One way to insure the needed care is to write out the list of duties that caregivers will be responsible for.

Caregiver NAME and ADDRESS
Phone # Cell phone #..... Email.....
Emergency contact#

List the caregiver duties that help maintain the patients health.

- Feeding times and places
- Washing times and places
- Mail delivery times and location
- Trash pickup day and time
- Bedtime and awake time
- House cleaning time
- Medications (see PERSONAL PROFILE OF CANCER PATIENT)
Update the list of medications when needed.
- Laundry.....
- Getting patient to appointments.....
- Doctor appointments (see PERSONAL PROFILE OF CANCER PATIENT)
- Other Duties.....
.....

Who provides transportation? (list name of drivers and contact#)

Who provides emotional support for the caregiver?

Name and contact #

What methods help relieve caregiver stress?

Time off , Music, Reading, Writing, Support groups, Other?

CAREGIVERS BILL OF RIGHTS

I have the right:

1. to take care of myself. This is not an act of selfishness and it will give me the ability to take better of my patient.
2. to seek help from others even though my patient may object. I know the limits of my own strength.
3. to maintain parts of my life that do not include the patient.
4. to be angry or be depressed and express difficult feelings once in a while.
5. to reject any attempt by my patient to have me do things out of guilt or anger.
6. to get considerations, affections, forgiveness and acceptance form my patient as I offer these in return.
7. to take pride in what I am doing and applaud the courage it has taken to meet my patients needs.
8. to protect my individuality and the right to a life that will sustain me when my patient no longer needs my full time help.

YOUR PERSONAL PLAN for RECOVERY

Think carefully about each item listed below. List your options and discuss them with others. Develop plans and monitor your progress. Check each item when you are completely satisfied with your plan.

() Name your fears and your plans to address them.

.....

() Evaluate your diet and your plans for changes.

.....

() Evaluate your work, your social activities and your civic duties.

() I plan to start:

() I plan to stop:

() Evaluate the family changes that will be made in your household.

() I will delegate the following:

() I will ask for help for the following:

() I will stop doing the following:

() I want to add the following goals, hobbies and events to my life.

.....

() A spirit of thanks and an effort to help others may be very rewarding.

Plan to say "Thank you" to those who support your recovery.

() I will send a 'thank you note' to the following people.

.....

.....

.....

() I will help the following people.

.....

.....

INSURANCE ISSUES #1.

Carefully review the following items and check them when you are satisfied that you completely understand each issue.

There is no question. The word CANCER causes fear, anxiety, and stress. You may have decided to fight the battle and you want every penny of insurance coverage (private health insurance or Medicare) to work for you.

() Now is the time to carefully review your insurance policies. They are not the easiest things to understand and you may want some help from others such as a family member or your caregiver. It's important to know what's covered and the rules to follow when filing a claim. Your insurance company should be able to answer any question or that you do not understand.

Ask your insurance company to assign one person (**a case manager**) to work with you and help you file (submit) a claim.

() If you have Medicare, then review your "MEDICARE and YOU" booklet that is mailed to you annually until you completely understand everything. Ask questions until you are satisfied that you understand your responsibilities.

() If you have started treatment, then ask for the name of someone at your treatment facility who can help you with financial matters.

() Carefully review all bills from your health care providers (clinic, hospital, treatment facility) and ask about any charges that you don't understand.

() If you must file claims yourself, then do so immediately after the service is provided. Sometimes you may not be sure if some expenses are covered. If this happens, you may ask for help or file a claim and see what happens.

() If your doctor prescribes a medication, then always ask about the least expensive generic that provides the same health benefit. Try to use a drug that is on the PREFERRED LIST of your insurance company because they will generally pay more of the cost.

UNINSURED ?

There are several options to look into if you are uninsured.

() Contact an INDEPENDENT insurance broker. They may be able to find insurance coverage for you.

() Look into a state sponsored RISK POOL program. Some POOLS provide coverage for persons with pre-existing medical conditions.

() Check into PROFESSIONAL and/or FRATERNAL organizations if you are a member. You might be able to apply for "GUARANTEED ISSUE" group insurance.

() You may qualify for assistance from your state MEDICAID program if your income qualifies and you meet other rules.

() If you qualify for MEDICAID, then you may also get help for the cost of drugs through the federal MEDICARE program.

There are other organizations which may provide financial help for patients and families. Ask your Doctor.

INSURANCE ISSUES #2.

Review each item and check them when you are satisfied that you completely understand the issue.

It would be a good idea to contact your INSURANCE PROVIDER when you are diagnosed with cancer and request the guidelines for filing claims and making payments. The following questions may need to be covered. Some answers may be found in your INSURANCE POLICY manual. Other answers may be provided by your HEALTH INSURANCE provider.

How is a claim filed?

Who is the person who can answer questions about my claim?

(Yes)(No) Is there a need for a second opinion? May I request a second opinion?

(Yes)(No) Do hospital admissions need to be pre-approved?

What insurance deductibles am I responsible for?

How much does my insurance pay for the following treatments?

Diagnostic testing

Surgery

Chemotherapy

Radiation

Reconstruction

Emergency services

Transportation

Medications

Other treatments

Recordkeeping is very important for filing claims and paying bills. You may use something as simple as a shoe box. If you find recordkeeping to be overwhelming, you may want to ask a caregiver/friend/volunteer for help. The box may contain the following records.

Insurance Policy.

Appointment calendar.

Date/Name of Doctor/treatment provided.

Claims that have been filed.

Payments that have been made.

Bills from treatment providers.

Statements from hospitals, clinics, treatment and insurance providers.

Cancelled checks.

Credit card receipts.

Records of reimbursements.

Others.

OTHER FINANCIAL and LEGAL ISSUES

(yes)(no) Do you have a financial statement? Where is it located?

(yes)(no) Do you have an annual budget? Where is it located?

(yes)(no) Do you have a SAFE DEPOSIT box? Name of the bank(s)?

Where are the key(s) located?

(yes)(no) Do you have a home safe? Where is the key/combination located?

.....

List the contents that are important to your health (insurance policies, wills, etc.)

.....

(yes)(no) Are there other financial papers?

List (stocks, bonds, mortgages, rents, leases, loans, pensions, precious metals, others)

.....

.....

(yes)(no) Do you have an attorney? NameContact

Number.....

(yes)(no) Do you have a list of assets? Where is it located?

.....

(yes)(no) Do you have other insurance policies?

Property Insurance?

Company namecontact number

Auto insurance?

Company namecontact number

Life insurance?

Company namecontact number

Other insurance?

Company namecontact number

(yes)(no) Do you have a LAST WILL? Where is it located?

(yes)(no) Do you have a LIVING WILL? Where is it located?

(yes)(no) Do you have an Advanced Medical Directive? Where is it located?

(yes)(no) Are you an organ donor?

Where is your DONOR CARD located?

(yes)(no) Have you designated Power of Attorney?

Who has that power?Contact Number.....

FINANCIAL HELP FOR PATIENTS AND FAMILIES

Below are the names, web sites and phone numbers of organizations that offer financial assistance to people affected by cancer. Your oncology, social worker, hospital patient service representative can help you find additional sources of financial assistance.

MEDICAL CARE

Brenda Mehling Cancer Fund	www.bhcf.net	661.310.7940
Cancer Care	www.cancercaree.org	800.813.hope
Mission4Maureen	www.mission4maureen	
National Cancer Coalition	www.nationalcancercoalition.org	919.821.2182
Patient Access Network Foundation	www.patientaccessnetwork.org	
Patient Advocate Foundation	www.patientadvocate.org	800.532.5274

PRESCRIPTION EXPENSES

Friends of Man	www.friendsofman.org	303.798.2342
HealthWell Foundation	www.healthwellfoundation.org	
Patient Services Inc.	www.uneedpsi.org	800.366.7741
RxAssist	www.rxassist.org	
RxHope	www.rxhope.com	
Together Rx Access	www.togetherrxaccess.com	
Needy Meds	www.needymeds.org	

EQUIPMENT AND SUPPLIES EXPENSES

Breast Cancer Network of Strength	www.networkofstrength.org	
Cancer Fund of America	www.cfoa.org	865.936.5261

ESTATE PLANNING

9 THINGS TO DO WHILE YOU STILL HAVE TIME

1. Inventory physical items. Look all over the inside and outside of your home and make a list of all items worth \$100 or more including TV's, jewelry, collections, vehicles, power tools, etc.
2. Inventory non-physical items including bank accounts, 401k plans, IRA assets, life insurance policies and all other insurance policies such as homeowners, health, auto, disability, etc.
3. List all credit cards and debts. Include everything such as auto loans, existing mortgages, and home equity lines of credit.
4. List Organizations that you proudly support and Clubs that you belong to.
5. Review and update retirement accounts and policies where you list beneficiaries. It does NOT matter how you list these accounts/policies in your WILL or TRUST because your beneficiary listing will take precedence.
6. Review and update life insurance and annuities to ensure that your beneficiaries are listed correctly.
7. Assign TRANSFER-ON-DEATH (TOD) designations to your accounts such a bank savings, CD accounts, etc. Probate is an avoidable court process where assets are distributed per court instructions. Many of the accounts listed above may be set up with a TOD feature to avoid the probate process.
8. Create a WILL. Everyone over the age of 18 should have a WILL. Just make sure that you always sign and date your WILL, have two witnesses sign it and have a notarization on the final draft.
9. Review and update your documents at least once every two years and after any major life-changing event such as marriage, divorce, birth of a child, etc. Life is constantly changing and your inventory list and beneficiaries are likely to also change.

The 5 most important ESTATE planning documents include: (1) Your WILL, (2) a durable Power of Attorney, (3) a health care Power of Attorney, (4) a Living Will, and (5) a revocable Living Trust.

There are 10 things you should know about designating beneficiaries.

(1) the correct name of the beneficiary, (2) the names of both primary and contingent beneficiaries, (3) update for life events, (4) coordinate with your WILL and TRUST, (5) understand potential consequences of naming individual beneficiaries for particular assets, (6) avoid naming your ESTATE as beneficiary, (7) use caution when naming a TRUST as beneficiary, (8) explore rollover alternatives when changing jobs, (9) consider naming a charitable organization as beneficiary, and (10) use disclaimers when necessary. This information may be obtained from the following sources:

Wells Fargo Advisors, LLC One North Jefferson, St. Louis, MO 63103

www.estate.findlaw.com/

www.dummies.com/EstatePlanning

www.ameriprise.com

MANAGING YOUR MOOD

How to recognize normal moods and reactions.

How to know when you need help.

ANXIETY

Make a commitment today to concentrate on the things you CAN control and let go of the things you CAN NOT control.

This will go a long way with helping you cope.

- I will take good care of my body.
- I will eat a healthy diet every day.
- I will exercise regularly.
- I will find some relief in completing practical tasks.
- I will have a system for dealing with insurance issues.
- Wills and other legal matters will be finalized.
- I will address end-of-life issues.
- I will see that burial plans are completed.

POSITIVE THINKING

There is no evidence that your emotional outlook affects your survival. On the other hand, there is something to be said about how your positive mood affects your relationships with others. People's reactions to cancer may differ greatly. It's important to remember that the cancer experience is yours alone. There is no need to feel like you have to please others by thinking, feeling or acting in a certain way. You may cry if you need to as long as the pity party lasts only five minutes. After that, it's time to get on with the life that you have.

GUILT

Guilt is a barrier to living your life to the fullest. Experts recommend working through your guilt feelings with a social worker, counselor or clergy. Other options include support groups and keeping a journal about your feelings. Looking back is not productive. You may be able to stop blaming yourself by accepting the fact that you can not change the past.

- I will attend a support group.
- I will keep a journal and monitor my progress.

DEPRESSION

Persistent feelings of helplessness and hopelessness and worthlessness are not typical and you should notify your doctor. Remember that some hormonal treatments can cause mood disturbances.

Patients with mild to moderate depression often respond well to talk therapy, support groups, buddy systems and cancer education programs. The objective is to regain a sense of control over your daily life routines.

- I will form a buddy system.
- I will get appropriate cancer education.

Patients with moderate to severe depression may need medication and psychotherapy. There is a range of antidepressants and there is a range of side effects. Their use should be monitored. Depression is an illness. Don't hesitate to get help if you need it.

- I will speak to my doctor.
- I will take medication in a responsible manner.
- I will deal with side effects if they occur.
- I will monitor my progress.

TALKING POINTS #1

Talking to cancer patients and survivors

It's more important to LISTEN when talking to cancer patients. HEAR and UNDERSTAND what they are saying about how they feel. Put your own feelings and fears aside and let them know that you are open to LISTENING.

Cancer patients may express anger and frustration to those around and close to them. This may upset family members and close friends. Remember that it helps cancer patients to "dump" their feelings on people close to them because they are a safe outlet. They know that family members and close friends will remain there for them even if they behave badly. It's normal for some people with cancer to act like a child. They become needy and dependent during their weakness. Remember that behavior changes are due to fear and anxiety and most likely it's temporary. Engaging in "blame games" is a barrier to healthy relationships. It's more helpful to focus on the hopeful and positive things of life.

One of the most important ways to help is to ask, "What are you feeling?" This question gives the impression that you are sincerely interested. Be prepared to HEAR anything. And you do not have to reply.

1. Let cancer patients take the lead in the conversation. Just LISTEN if they want to talk. Listen to WHAT is said and HOW it is said.
2. Learn to be OK with silence. Your silence may help cancer patients to focus their thoughts. Constantly talking because you are nervous can be irritating. Silence may be comforting and allow for more expression of feelings.
3. Maintain eye contact. This creates a sense that you are listening carefully.
4. Touching, smiling, and warm looks can break down the barriers of expressing feelings.
5. Refrain from giving advice because it's often not received as you intended. Cancer patients may be in pain at the moment and not receptive or they may be frustrated and unable to focus. Try waiting until they ask for your help.
6. Do not say, "I know how you feel". Even if you do know, cancer patients may become angry because you are not in their situation. Anger is a barrier to TALKING and LISTENING.
7. Refrain from talking if you are tearful due to grief or sorrow. Stay away until you can be near without tears. Do not expect cancer patients to comfort you.
8. Cancer patients do not always want to talk or even think about their condition. Laughing and talking about other subjects is often a more desirable distraction.
9. Encourage cancer patients to continue doing as many activities as possible. Do not take cancer lightly but do not be overprotective. If energy levels are low then rest breaks should be taken.
10. Encourage family members and friends to get involved with care giving, doing errands, phoning or sending emails, cooking meals, caring for kids or visiting. Put the cancer patient on your weekly "to do list". Do not let cancer be a lonely and isolating experience. Stay in touch. Do not worry about doing things the "right" way. Your compassion and care giving are what is most important.

TALKING POINTS #2

How to talk to your children about cancer.

1. Children may sense that something is different. Do not deny the truth. Tell them that you have cancer. You are being treated and you are doing everything possible to get well. If you are optimistic, then the kids will be also.
2. Use the word "CANCER" in your conversations. Otherwise, children may imagine that you have some other contagious disease or that your entire body is sick. Let them know that it's OK to hug and kiss. Affectionate touching is an important part of healing.
3. Make sure that younger children understand that cancer is not their fault. Younger children tend to blame themselves when something goes wrong in the family. Let them know that cancer is not the result of anything they have done.
4. Prepare children for the future. Describe your treatments in terms that they can understand. Let them know about your surgery, chemotherapy, and radiation. Children should know that you may lose your hair but it will grow back. You may get tired and short tempered for a while but those feelings will also pass.
5. Encourage children to ask questions. Let them know that you will tell the truth and you will find answers for their questions when you don't know. Encourage openness rather than letting them worry in secret.
6. Reassure children that they will be cared for in the days and months ahead. Kids tend to worry about what might happen when a parent is disabled. They should be assured that someone will be around to take care of them.
7. Locate the available resources that support children whose parents are battling cancer. Some of the resources may be found at your clinic, hospital, treatment center or schools in your community. This is especially important if they are withdrawn, depressed or their school work begins to suffer.
8. Keep your family routine as normal as possible. Try to schedule treatments while the children are at school if at all possible. Do not forget their birthdays or special holidays.
9. Display optimism, faith and hope. Children often learn and believe what is seen rather than what they hear. One smile and a hug are more encouraging than many pep talks.
10. Do not neglect your spiritual life. Read and meditate on Bible verses. Local support groups may lift your spirit. Remember that you do not walk down the road alone. Many have walked down the road before you and are ready to help you when you ask.

LEARNING to RELAX

Learning to RELAX may take some effort. There may be several distractions which will prevent you from getting a focus on relaxing. Distractions may include stress, anxiety, anger, guilt, frustration, pain and fatigue. You might also have to deal with the side effects of treatments and medications. These and other distractions may cause your body to become tense. It's important then that everybody, cancer patients, caregivers, family members and friends learn to RELAX. It's an important exercise for a healthy life.

Your effort to RELAX begins with the following steps:

1. Find a quiet space and sit in a chair.
2. Place your hands in a comfortable position.
3. Close your eyes.
4. Think of something that gives you a sense of peace and love.
(a word)(a prayer)(some scripture)(art)(music)(song lyrics)(an award)(a dream)
5. Take a deep breath and hold it for a few seconds.
6. Breath out slowly and recall what gives you peace
7. Repeat these steps for 10-20 minutes.
8. If your mind wanders, refuse to think about the distraction and return to your exercise.
9. Open your eyes and gradually return to reality.

During this exercise you may feel changes like tingling, a sense of floating, drifting or dropping. These sensations indicate that your body is relaxing. This exercise may be practiced anytime you feel stressed or fearful. Taking charge of stress and keeping it manageable is a step toward improving both physical and mental health. Learning to RELAX is something you can do to remain in control of your emotions. Relaxing may prevent the "fight or flight" response and create the ability for you to stand and fight for your health.

HEALTHY DIETS

Ideas to help you maintain a low-fat diet.

Check the items when they are completed.

- Eat more chicken, turkey and fish instead of red meat.
- Remove the skin off chicken, turkey and fish.
- Decrease or eliminate the amount of fried food in your diet.
- Broil, bake, roast, steam, microwave or grill your food.
- Use low-fat/fat-free salad dressing and mayonnaise.
- Eat low-fat cheese.
- Eat frozen yogurt instead of ice cream.
- Eat low-fat or whole grain breads.
- Eat more pasta and sugar free cereals.
- Eat more fresh fruit.
- Cook vegetables with little or no oil/fat.
- Drink low-fat milk.
- Drink at least 24 ounces of water each day.
- Read labels and watch for hidden fat.
- Replace butter with substitute spreads.
- List other changes that you want to make.
-
-

FREE personalized nutrition counseling for cancer patients.
American Cancer Society Dietician ON CALL Service
Nutrition counseling can help you deal with the side effects of weight loss or gain and eating difficulties.
1.888.227.6333

FATIGUE

Ways to manage fatigue caused by cancer and treatments.

There are several ways that cancer patients describe the symptoms of fatigue (tired, exhausted, weak, worn out, no energy, can't concentrate, lost focus). Compared to normal fatigue, fatigue that is related to cancer and its treatment is usually more severe, it lasts longer and it is not fixed by a good nights sleep. Managing your fatigue is an essential part of health care following cancer and treatment.

Fatigue prior to treatment may be caused by several factors such as stress, anemia, infection, reduced activity and altered sleep-wake cycles. Following treatment, fatigue has several causes including anticancer drugs, nausea and vomiting, sleep disorders, strong pain relievers, antiseizure drugs and antidepressants. Also, the risk of fatigue may increase if you have some drug interactions.

1. DO NOT ASSUME that your fatigue is part of your cancer experience. Talk to your doctor if your fatigue and frustration affects your ability to do normal activities. Rate your fatigue on a scale of 1 to 10 or describe it as mild, moderate or severe. Tell your doctor about all the medications you are taking including prescriptions, over the counter drugs, vitamins and herbal supplements. This information will help your doctor decide causes and treatments for your fatigue. You may need to stop taking some drugs, change to different drugs to avoid interactions.

2. Many people think that more rest will help reduce their fatigue. However, the opposite is true. Increasing activity and performing regular exercise are the best ways to help manage your fatigue. You may be able to reduce your fatigue by 50% by regular aerobic exercise, walking or bicycle riding. Start exercising early in treatment because it will be more difficult once fatigue occurs.

3. Decide which tasks or activities are most important and do them when you feel your best during each day. You may not be able to complete all of your important tasks this day or maybe not ever. Think about making a list and ask for help from family and friends.

4. Regular rest is important. Set a rest time each day. For example, you might schedule rest before or after lunch. It's important to limit your rest periods to 45 minutes. Several rest periods are more beneficial than one long rest. Long rest periods during the day may interrupt your sleep cycle at night.

5. There are other ways to manage your fatigue.

- Sit down when washing or grooming.

- Use canes or walkers if necessary.

- Perform deep breathing to increase the oxygen level in your blood.

- Listen to your favorite music.

- Play board games.

- Pray and meditate.

- Eat a well balanced diet.

EXERCISE GUIDELINES and PRECAUTIONS

It has been proven that regular exercise such as walking can significantly increase the quality of your life both during and after cancer treatments. For this reason, the following walking program is recommended.

Check into the exercise programs at the Galax Rec. Center and the Hillsville Wellness Center.

Frequency of walking:

- Minimum of 4 times each week.
- Maximum of 6 times each week.
- Do not skip any walk as long as your health permits.

The goal of walking:

- Gradually increase your heart rate (beats per minute).
- Reach a heart rate of 100-120 beats per minute.
- Maintain your walking heart rate for 20 minutes.
- Slowly decrease your heart rate to normal.

The place for walking:

- 1st choice is outdoors at a safe location.
- 2nd choice is indoors at a mall or on a treadmill.

Preferred clothing for walking:

- Safe walking shoes.
- Layered loose cotton clothes.

Make walking a pleasant event

- Listen to music if you walk alone.
- Walk at the same time each day.
- Drink 8 ounces of water before and after each walk.
- Keep some record to monitor your progress.

Walking safety:

- Carry your personal ID in case of an emergency.
- Face traffic if walking on a roadway..
- Do not walk on a road during dark hours.
- Walk with a partner if possible.

There are several other safety precautions. Do not walk if you have any of the following conditions.

- Fever, nausea, vomiting, severe pain or swelling in muscles or joints,
- bleeding from any source, irregular heart beat, dizziness or fainting
- pain in the chest, arm or jaw, you will be having chemotherapy on the same day,
- you will have blood drawn on the same day, or restrictions from your doctor.

My walking commitment

- I will check with my doctor before starting my walking program.
- I will start my walking program on the following date.
.....
- I will ask the following person(s) to walk with me.
.....
- I will keep a record to monitor my progress.
.....
- I will walk in the following place(s).
.....
- I need the following to start.
.....
- (shoes)(shorts)(shirts)(hat) (gloves)(jacket)(music player)(other)

HOME SAFETY and SECURITY

Answer (yes) or (no) and fill in the blanks. Check other items when they are complete.

SAFETY

(yes)(no) Are walkways from the car to the house smooth and free of obstacles.

(yes)(no) Does your home need a wheel chair ramp?

(if yes) Write in name and contact # of person who will install the ramp.
.....

(yes)(no) Have hand holds been installed in the bathroom next to the tub, shower, toilet?

(if no) Write in the name and contact number of the person who will install them
.....

(yes)(no) Have hand rails been installed on all stairways?

(if no) Write in the name of the person who will install them.
.....

(yes)(no) Are doorways wide enough for a wheelchair?

(if no) Write in the name of the person who will make them wide enough.
.....

(yes)(no) Has furniture been arranged to allow a wheelchair to move around the house?

(if no) Write in the name of the person who will arrange the furniture.
.....

Check with Social Services or Rooftop of Virginia for help with the above items.

() Store hazardous chemicals and drugs in a secure cabinet away from kids.

() Inspect rugs and make sure they do not cause tripping/slipping problems.

() Have a qualified person inspect and correct the home heating system each year

() Remove the grill cover from floor heat registers and clean out the dust and debris.

() Remove stored items that block return registers

() Inspect and clean dust from ceiling vents.

() Change smoke detector batteries every October.

() Fix all water leaks.

Write in name of plumber who will fix leaks.
.....

() Insulate water pipes from freezing where necessary.

() Keep flashlights at locations that are easy to reach.

() Inspect the home for electrical hazards.

() All electrical outlets are grounded.

() Outlets located where needed.

() Some medical equipment may require special electrical outlets.

SECURITY

() List doors which need to be locked each night.
.....

() Where are keys stored when not in use?
.....

() Do fences need gates which lock?

(yes)(no) Does the home have an alarm system?

(if yes) Name and contact # of the company who provides services.

(yes)(no) Has your home phone system been put on the "do not call" list?

() Are yard lights activated by motion detectors?

() Store guns and ammunition away from kids

(yes)(no) Are you interested in S.A.L.T. (Seniors And Law enforcement Together.)

() Contact the Galax Police Dept. for more information about upcoming events about senior safety and security.

SAFE DISPOSAL of DRUGS

Where does your water come from? Many of the residents in the TWIN COUNTY area depend on private wells and springs for their water. Many of these water sources have been tested for the common biological hazard (Coliform bacillus). The presence of coliform indicates fecal pollution, either human or animal. There are ways to protect you from this hazard. It is unlikely, however, that your well or spring has ever been tested for common household drugs such as (oxycodone/acetaminophen) a common pain reliever that is used by many patients.

We depend on the ground around us to filter all kinds of waste (our household chemicals, waste water, garden chemicals and liquids that drip from our vehicles to name a few. This dependency has worked for us in the past. However, we are filling the ground around us with an increased volume of complex chemicals and some of them are not being filtered or completely digested. In the interest of better health, please consider the safe disposal of all your drugs.

RESOLUTION

- I will NOT flush drugs down my toilet or wash them down any drain,
- I will NOT let anyone else use my empty pill containers to store something else.
- I will ask my pharmacist if I have a question.
- I will choose one of the following options to dispose drugs and empty containers.

OPTIONS

1. Use the TAKEAWAY Environmental Return System.
TAKEAWAY accepts only non-controlled/over the counter drugs.
2. Mark your Calendar. Each year CVS may host a return day for all drugs.
3. Visit www.smarxdisposal.com for more information.
4. Visit www.DEA.gov or phone 800.882.9539 for a site near you.
5. Visit the NATIONAL TAKE BACK INITIATIVE web site for more information.

DENTAL HEALTH

Some cancers and treatments can cause side effects in your mouth. A dental checkup BEFORE cancer treatments start can help prevent serious and painful mouth problems. A dentist will help protect your mouth, teeth and jaw bones from damage caused by radiation and chemotherapy. Serious side effects in the mouth can delay, or even stop, cancer treatment.

Some chemotherapy drugs are good for treating some cancers. The drugs that kill cancer cells may also harm normal cells in the mouth. They upset the normal chemical balance in your mouth and cause problems with your teeth, jaw bones and saliva.

Dry mouth is NOT a normal part of aging. If you think you may have dry mouth, then speak to your dentist to correct the problem. Symptoms include: sticky dry feeling in the mouth, trouble chewing or swallowing, a different taste or problems speaking, a dry rough tongue, mouth sores, or an infection in the mouth. Saliva does more than keep the mouth wet. It helps digest food, it protects teeth from decay, it prevents infection by controlling bacteria and fungi in the mouth, it makes chewing and swallowing possible. Without enough saliva you can develop tooth decay or other mouth infections. There are more than 400 medicines that can cause the salivary glands to make less saliva.

Take the following action:

- () schedule a dental exam and correct all problems before starting cancer treatment.
- () schedule follow up exams to maintain dental health during cancer treatment.
- () discuss all dental problems and follow their plan for dental health.

Rules for good dental health:

1. Rinse your mouth often with baking soda and salt followed by a plain water rinse.
2. Talk to your dentist about a saliva substitute such as biotene.
3. Contact your cancer team if you have a mouth sore, swelling, bleeding, or a sticky white film in your mouth.
4. Three times daily decrease stiffness in chewing muscles by opening/closing your mouth 20 times.
5. Brush your teeth after every meal and before bedtime.
6. Reduce your consumption of sugary foods that cause cavities.
7. Stop using all tobacco products and alcoholic drinks.
8. Stop using mouth washes with alcohol.
9. Talk to your dentist/oncologist about dentures that do not fit well and may cause problems.
10. When your mouth hurts, talk to your dentist/oncologist about medicines to help control the pain.

GETTING EMOTIONAL AND SPIRITUAL SUPPORT

Emotional and spiritual support are an important part of maintaining a balanced life. The road to recovery is paved with fears, anger, guilt, and anxiety. Depression may drag you down. It's time to contact a local church. Many local clergy are trained to help in this area.

There are several other options. Ask your doctor for a reference. Ask the Chaplain at the hospital. Ask Social Services or Hospice for a reference. There is a Cancer Support Group that meets the first Tuesday of each month at First Baptist Church in Hillsville. Other options may be available in the future. Seek and you will find.

- I will seek emotional and spiritual support.
- I prefer the following church.
- The clergy's name is:
- Social Service referred me to:
- Hospice referred to:
- I prefer the Hospital chaplain.

TRANSPORTATION

Cancer patients may be able to fill their transportation needs using local sources. Your condition or treatments may make you unable to drive. Your first choice should be family and friends. Do not hesitate to contact them. Some of them may be waiting for your call. Local churches have members who are willing to help you. There is no need to feel like you are a burden and you do not need the extra stress worrying about getting to and from your treatment. Some of the other options are listed below. Do not expect that a phone call today will get you a ride tomorrow. Each option may take some time to complete the initial application

- **THE AMERICAN CANCER SOCIETY** coordinates groups of volunteer drivers. They are familiar with your type of need. They may be able to provide transportation for patients who can not drive but are able to walk. Call 5 – 7 days prior to your need and give the date, time and your destination.
- Toll free 1.800.277.2345

- **LOGISTICARE** may provide drivers for MEDICAID patients. Their drivers may pick you up at your home. These services are available Monday – Friday 8am to 5pm. All trips must be medically necessary and a TRANSPORTATION REQUEST FORM must be completed in advance.
- Fax your request form to: 1.866.907.1491
- Toll free; 1.800.315.3485
- Goto: www.logisticare.com/logisticare of virginia

- **DISTRICT THREE TRANSPORTATION** is a government funded public transportation system. You may have seen their white vans in the Twin County area. Their service may or may not fill your needs because their schedules and destinations are fixed. Be sure to check their schedules and destinations carefully. You may have to change your treatment times and durations.
- Call Carroll County Public Transit 276.238.4293
- Call Grayson County Public Transit 1.800.238.4293
- Call Galax Public Transit 276.236.2035
- GOTO: www.district-three.org/publ.php

FOOD, HOUSING, HOME HEALTH

Social Services

Carroll County	605 Pine St.	Hillsville	730.3130
Grayson County	P.O. Box 434	Independence	773.2452
Galax City	P.O. Box 166	Galax	236.8111

Social Security Administration

1480 E. Main	Wytheville	800.772.1213
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American Red Cross

244 Bee Line Dr.	Galax	236.2891
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Food Banks

Willing Partners	Galax	236.2072
Rooftop of Va.	Galax	236.7131
1 st . Methodist Ch.	Hillsville	728.2434
SW. Va. 2 nd Harvest		540.312.3011
Tigerlily Foundation*		888.580.6253

*For breast cancer survivors

Income based housing

Harmony Village	1149 Glendale Rd.	Galax	236.5555
Northway Apts.	128 Wilson Ave.	Galax	236.8991
Glendale apts.	102 Sutherland	Galax	236.9961
Grayson Manor apts.	224 Nichols Dr.	Independence	773.3500

Health Departments

Carroll County	.....	.....	728.2166
Grayson County	.....	.....	773.2961
Galax	.....	.....	236.6127

Home Health Care

Amedisys Home Health	.....	Wytheville	227/0249
Blue Ridge Home Health	.....	Galax	236.1974
Families First Home Health	.....	Galax	236.3000
Liberty Home Health	.....	Cana	755.4766
New River Home Health	.....	Independence	773.2244
Twin County Home Health	.....	.....	.....

Other Services

Twin County Hospice	.....	.....	236.0973
Mt. Valley Hospice	.....	.....	236.3939
Legal Aide	.....	.....	866.534.5243
Guardian Ambulance	.....	.....	236.5012
Todd Chiropractic	Massage	Therapy	236.4878
Blue Mt. Massage	115 Grayson	Galax	235.1210
Med. Nutrition Therapy	Sarah Geisler	.....	733.9831
Prescription assistance	low income	toll free	888.227.6333
Cancer Support Group	1401 N. Main	Hillsville	276.728.4753

HOME HEALTH EQUIPMENT and SUPPLIES

Cancer Services Inc.
3175 Maplewood Ave.
Winston-Salem, N.C.
Phone 336.760.9983
Toll free 800.228.7421

- Equipment may be picked up or returned M-F 9am-4pm
- All equipment pick-up and return is patient's responsibility.
- Cancer Services does not have a pick up/delivery service.
- Hospital beds need to be moved by 2 people and a truck.
- Cancer patients have priority over all other patients.
- All equipment must be returned within one week after the need.
- All equipment should be cleaned prior to return.
- All equipment and supplies are loaned free of charge.
- Please call us if the item you need is not listed below.
- Cancer Services accepts donations of the items listed.

Electric hospital beds	mattresses	bedrails
Wheelchairs	electric wheelchairs	electric scooters
Bedside commodes	walkers and canes	crutches
Over bed tables	bathtub rails	shower stools
Shower benches	commode extensions	bed pans
Lift chairs	wigs	wig heads
Turbans, scarves	pajamas and gowns	wig supplies
Bed pads	blankets	mastectomy supplies
Ostomy supplies	sheets, pillowcases	adult diapers
Disposable dressings	baby monitors	disposable gloves
Hygiene supplies	health supplies	others

Sometimes we may run out of certain items but we will gladly put on our waiting list.

“INSPIRING COURAGE THROUGH COMPASSION”

Thank you.

15 FACTS YOU SHOULD KNOW ABOUT HOSPICE CARE

Twin County Hospice
276.236.0973
www.tcrh.org

1. Hospice provides medical, psychological, spiritual and social support to patients with life-limiting illnesses and their families. Specialized pediatric services and community grief support are also provided. We emphasize good care, frequent visits, and choices for patients and caregivers.
2. Professional staff is available to discuss Hospice services with anyone who needs information.
3. Hospice is NOT a place. Care is provided anywhere: your home, a skilled facility, an assisted living facility, group home or hospital.
4. Hospice patients may live alone. Hospice will assist patients with making a plan of care when they are no longer able to care to themselves.
5. There is NO COST for Hospice care. Medicare, Medicaid and private insurance cover the cost of Hospice care. Donations and contributions cover the cost of care for patients without insurance.
6. Hospice provides care for veterans. The Veterans Administration partners with Hospice for all enrolled Veterans and can pay for care through contract agreements.
7. Hospice is NOT sudden death. Hospice care does NOT mean giving up. The patient can make choices and be actively involved in care decisions.
8. Hospice is NOT just cancer patients. Care is available to anyone with conditions that are life limiting and not curable.
9. Patients may keep their doctor. The Hospice care team works with the patient, caregiver, family and doctor. If the patient does not have a doctor, a Hospice Physician maybe provided.
10. Hospice is NOT limited to 6 months of service.
11. Hospice is NOT just for patients. Hospice may teach caregivers and provide emotional and spiritual support.
12. Hospice does NOT take over. Patients and caregivers may choose their medical equipment, pharmacy and other services.
13. Hospice manages medications, evaluates drug reactions and interactions so that patients are comfortable.
14. Hospice is NOT just “old people”. Children with life-threatening illnesses may also receive Hospice or Palliative (comfort) services.
15. Hospice is comfort. Education and grief services may be provided to anyone who needs assistance including children and teens.

ASSISTANCE Special ACS Programs

American Cancer Society

Available 24 hours a day and 7 days a week

1.800.ACS.2345

www.cancer.org

LOOK GOOD – FEEL BETTER

Helps patients locate cosmetologists for help with wigs and makeup.

REACH FOR RECOVERY

Helps patients locate volunteers who will provide transportation to and from treatments.

FOOD

Rooftop of Virginia

Phone: Linda Frazier at 276.236.7131 (ext. 226)

SW. Va. Second Harvest Food Bank

Phone: 540.312.3011

Tigerlily Foundation

For breast cancer survivors.

Meals prepared and delivered.

Phone toll free: 888.580.6253

MEDICATIONS

Prescription assistance for low income patients

Phone toll free: 888.227.6333

HOUSING IN WINSTON-SALEM

Hope Lodge

Contact: Nationwide coordinator at 302.324.4227

Hawthorne Inn

\$49/night with referral.

Phone: 336.777.3000

OTHER RESOURCES

Horizon Medical Equipment
340 Virginia Ave. Wytheville, Va. Phone 276.228.4702
974 East Stuart Drive Galax, Va. Phone 276.236.7102
Hours 8:30am to 5:00pm m-f.
Toll Free 1.888.470.4702
www.horizonme.com

Mountain Valley
Hospice and Palliative Care
401 Technology Lane Suite 200 Mt. Airy, N.C. Phone 336.789.2922
Fax:336.789.0856

Free Subscription
CURE Magazine
www.curetoday.com/subscribe
Toll Free 800.210.2873
Fax:214.367.3306

Free Subscription
Patient Resource Cancer Guide magazine
www.patientresource.net
Phone: 816.333.3595.ext.26

TO MY LOVED ONES

I have recorded information on decisions that I have made in advance to help you during this time. If you will give this page to my funeral director, then everything can be conducted in accordance with my written wishes. I believe that this will minimize the emotional strain on you at this time and relieve you from the anxiety and burden of making these decisions.

Full Name.....SSN#.....Birth Date.....

Birth place City.....

State.....

Current Address City.....County.....

State.....

Father's Name.....Mother's Name.....

Surviving Spouse's Name.....Education Highest Grade.....

Surviving relatives.....

Names of Children.....

Names of Grand Children.....

Names of G. Grand Children.....

Achievements.....

Accomplishments.....

Civic Involvements.....

Funeral Home/Crematorium.....Clergyman/Speaker.....

Clothing choice.....Personal Items.....

Floral choice.....Music Preferred.....

Donations made to.....

Eulogy.....

Open Casket.....Type of Urn.....

Suggested Pallbearers.....Phone #

.....

.....

People to notify.....

Organizations to Notify.....

Armed Forces Branch.....Rank.....Service (YMD).....

Citations/Honors/Metals.....

Doctor's Name.....T.O.D. (Date/Month/Year).....

News Papers.....

Radio Stations

Vault/Marker/Grave.....

Memorials.....