



# Intercom

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### Lock Car, Hide Valuables, Public Safety Recommends

CB radios are popular not only with medical center personnel, but also with the thieves who occasionally break into their cars.

The parking garage, where crowded conditions make it easy for someone to hide, continues to be particularly susceptible to crime, and the most prevalent crime there is stealing CBs from cars, according to public safety Capt. Tim Wheatley.

Wheatley said there also is some theft of tape decks, as well as a high concentration of break-ins to steal suitcases left lying on the seat.

#### Thieves Are Curious

Evidentially the unknown contents of a suitcase whet the curiosity of the thief, he said: "They don't know what it is. It might be dirty underwear or it could be valuable jewelry."

Wheatley suggests some things individuals can do to protect against such burglaries.

One is the installation of quick-release mounting for CB radios. The owner then can remove the radio easily and lock it in the

trunk or take it inside any time the car is parked.

Burglar alarm systems also are available for cars, Wheatley said, noting that some car thieves can break into a car as quickly as the owner can open it with a key.

#### Use Your Trunk

All valuables should be locked in the trunk. "I don't know of any incident in our garage of someone breaking into a locked trunk," Wheatley said.

He further suggests borrowing an etching tool from the Durham Public Safety Department and engraving one's driver's license number in the metal of a CB and other valuables.

Wheatley noted that theft in the garage is about equally divided among the three decks.

He said that most thieves drive into the garage so they can haul out what they steal. But they did catch one man walking out of the garage and carrying three CBs in a pillow case.

"He's serving time for that right now," Wheatley said.



THAT'S A BIG TEN-FOUR—CBers can prevent theft of their radios by following the example of F. A. Ward, parking attendant, and installing a quick-release mounting. A simple pull of the lever and it slides right out to be locked in the trunk or carried inside with you. For a related story and photos see page 3. (Photo by John Becton)

### Exit Interviews in Orthopaedics

## Are There Any Questions Before You Go?

By John Becton

(From a report by Carolyn Bradley, reporter, Ambulatory Nursing.)

Since a number of people are inclined to seek medical help only

when they absolutely have to, they may be neglecting less obvious medical needs, as well as preventive health measures.

Recognizing this situation, as well

as desiring that patients get the most out of their treatment, the Orthopaedic Outpatient Clinic (OPC) has begun conducting exit interviews.

The depth of the interview may vary with how busy the clinic is, and presently not every patient is interviewed with every visit. But while the interviews once were conducted in the hall, now they take place in a room designated for that purpose.

#### Becoming Part of the System

"It's still somewhat informal, but we're working it into our routine, and it is our hope that eventually all patients will have exit interviews," Head Nurse Pam Falls said.

All interviews are done by Falls, RN Annie Johnson or ALPN Jessie Smith.

They make sure the patient understands any home treatment that may have been prescribed, including exercise, cast care and medications.

Patients' reactions to the interviews were described by Falls as "very receptive and complimentary, for the most part. They appreciate someone sitting down and talking with them, after possibly having been rushed through."

#### Prevent Problems

The interviews also prevent future

problems which arise when patients go home without a complete understanding of their problem or care needs, she added.

"Sometimes patients don't understand or have forgotten what the doctor has said. Or they may not have asked questions because of the image of doctors some have. It is simpler to talk with them while they are still in the clinic than for them to have to call with questions later."

Patients often are asked if they are having any other medical problems and are referred if necessary.

A recent case is an example.

#### High Blood Pressure

A male patient, in his 40s and slightly overweight, had been admitted to the hospital for a lacerated hand. His post-operative care was provided in the Orthopaedic OPC.

Responding to the nurse's question about his general health, he mentioned that he had been told during hospitalization that he had high blood pressure (hbp).

According to the patient, nothing else had been said or done about the condition. This raised several questions: Did he really have hbp? Should he be treated? Did he understand what hbp really is?

The nurse's assessment revealed

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BEFORE YOU GO HOME—Pam Falls, RN, Orthopaedic Outpatient Clinic head nurse, goes over home exercise instructions with a patient as part of the patient exit interview. (Photo by John Becton)