Advice from Other Patients

I wasn't as scary as I thought it would be. I wasn't a very good judge of just how much I needed help: I wish I had come in sooner. I wish I had stopped whining about being here and just made it count. Figure out what the early signs are, before you start getting overwhelmed. Coping helps you and your loved ones. Using affirmations really helps. What helped me most was to write out the crisis prevention plan early so that I could start practicing it. I thought coping skills were only for suicidal thoughts, but they're actually meant to maintain a healthy mind.

I'm not the only one. I'm not broken or worthless. I'm not a burden: these people really want to help. It's a judgment- free zone. Everyone here really cares about you and your health. Sharing is important, but just being around others helped way more than I expected: still, trading phone numbers is not recommended. We are stronger together. Taking care of others shouldn't get in the way of taking care of yourself.

Everyone is here for different reasons. It's okay to not be strong all the time. It's okay to cry in front of other patients. Be human. There are different types of depression and they have different treatments. There are different kinds of hearing voices. You may never know why you have anxiety, and there might still be some anxiety left over when you discharge. Whatever you are struggling with, most things can get a lot better. You can learn to write your own story. Ask lots of questions. Medications help but groups help more. Participate: don't hide in your room.

Hospitalization is one of the most comprehensive evaluations that exists. It's like a school: take time to learn things that you can take home. Being a patient here is not a punishment and it's not a sign of weakness, even if you're back. It takes a strong person to stand up and ask for help. Don't fight the issues alone. Be vocal, open, and involved. Don't just tell them what you think they want to hear: the sooner you get involved in your treatment, the quicker you will feel better. Nurses have a lot on their plates, but that includes caring for you: talking one-on-one was really helpful. If your meds aren't working, tell your doctor so that they can make changes.

Usual wake-up is around 7am. Most patients have roommates. A psychiatrist sees you every day and there are other doctors who can help with medical questions. There is a lot that happens on the first day, but you'll get into the rhythm. You can order your OWN food and use the microwave if your tray is cold. There are often snacks in the drawers. There are games and puzzles that you can use. There are two phones that patients can use: try not to take too long. If someone calls you, staff will take a message unless they have your code.

Ask staff for: towels to shower, lotion/stronger red-cap lotion, warm blankets for comfort, a stress-ball, coffee or a Coke, to change nicotine gum to hourly (or to lozenges), or earplugs at night. Feel free to ask about other things for your particular needs. Ask family to bring in a watch (there aren't many clocks), clothes, comfy slippers, and nothing with drawstrings. Sleep medicine really helps. They don't like you to take naps. Showering, eating, and sleeping regularly helps support your mood. The ability to relax is really important.

After discharge, they prescribe a 30-day supply of medications and usually give you appointments for a prescriber and therapist to work with. They can help you find group therapy if you want. If your life is at risk or if someone is telling you they will beat you or kill you, there are safe-houses that the staff can help you look into. The ER can be a last resort. Ask your doctor about when you will discharge and what to accomplish before then. The hospital tries to get you out quickly. This is a locked unit and they <u>can</u> keep you here, depending on your illness. Even if you came in voluntarily, you can't just sign yourself out. I didn't think the doctor was right to make me stay, but I'm glad he did: it helped me a lot.