



# GILLIES HOSPITAL

*A Surgical Group Ltd & Southern Cross Hospitals Partnership*



PATIENT INFORMATION

# Welcome

We are committed to making your experience as comfortable as possible. To help with this, we ask that you take some time to read this patient information pack before you come to hospital. It includes important details about the hospital, what you need to know and all the forms you need to complete. Please ensure all sections of the forms are completed fully so that we are able to meet your particular needs and deliver on our promise of quality care. Please allow enough time for all completed forms to reach the hospital one week before your admission. These can be either posted, faxed, emailed or hand delivered to the hospital. If you have any questions don't hesitate to contact us. We look forward to seeing you soon.

## Admission instructions

### Date of your admission:

**Please phone (09) 631 1900 between 1.00pm – 3.30pm on the business day before surgery for your pre-operative instructions.**

## Checklist

### Have you ...

- Completed and returned your 3 forms to the hospital (see 'Forms to fill in')
- Contacted your insurance company for "prior approval"
- Arranged transport to and from the hospital (see hospital map)
- Completed any special preparations

---

### Remember to bring your ...

- Patient information pack
- Insurance "prior approval" letter
- Anaesthetic Information Leaflet
- Current medications in original containers
- X-rays, scans or test results
- Doctor(s) letters
- Glasses, hearing aid and other personal aids

---

### MISSION STATEMENT

To be a centre of private surgical excellence with highly skilled professionals providing accessible family/whanau focused care.

## Post-operative appointment

# Index

<b>Gillies Hospital</b>	
<b>How to find us</b> .....	<b>4</b>
Information and map .....	4
<b>What you need to know</b> .....	<b>5</b>
Before you come to Hospital .....	5
When your child is having surgery .....	7
When you are at the Hospital .....	7
Preparing to go home & after you leave the Hospital .....	8
<b>Forms to fill out</b> .....	<b>9</b>
Agreement to treatment .....	10
Patient admission form .....	12
Paediatric health questionnaire .....	13
Adult health questionnaire .....	14



## HOW TO FIND US

### ***If you are coming from the North***

- Take the Gillies Ave exit • Turn right at the first set of traffic lights at the end of the motorway off ramp, this will take you back under the motorway, continue along Gillies Ave • Travel straight through two sets of traffic lights (Alpers Ave and Owens Road) • Gillies Hospital is on your left, just after Domett Ave at 160 Gillies Ave.

### ***If you are coming from the South***

- Take the Market Road exit • Turn left onto Market Road, travel straight through the traffic lights (intersection Great South Road and Market Road)
- Take the first right, Mount St Johns Ave • Follow this to the end • Turning left into Manukau Road and immediately right into Domett Ave • Continue to the end of Domett Ave • Gillies Hospital at 160 Gillies Ave is on the corner of Domett Ave and Gillies Ave.

**Parking available to the left of main entrance**

**Gillies Hospital** 160 Gillies Ave, Epsom, Auckland 1023. Phone: (09) 631-1900, Fax: (09) 631-1901  
[www.gillieshospital.co.nz](http://www.gillieshospital.co.nz)

## Before you come to Hospital

---



This information pack is designed to help you prepare for your hospital visit. Also included are your Patient Admission, Agreement to Treatment and Health Questionnaire forms, which assist the health team to plan your care. These forms include important questions about your personal and contact details, health history, consent for treatments, any special needs and payment arrangements. Please complete all sections fully so that we are able to meet your particular needs and deliver on our promise of quality care. Please allow enough time for all completed forms to reach the hospital one week before your admission. These can be posted, faxed, emailed or hand delivered to the hospital.

### **What to confirm with your doctor before your admission to Hospital**

- The procedure and informed consent
- If there is any special preparation you need to complete or further tests and investigations required
- Whether your regular medications and natural remedies should be taken as normal. Anticoagulants (blood thinning medication), for example, are often stopped prior to surgery
- What kind of illness may mean your surgery will be postponed and who you should contact

### **All patients are requested to bring**

- All documentation relevant to your procedure or surgery including letters, notes, medication cards from your doctor(s) or other hospitals
- Any test results, X-rays, or scans (CT, ultrasound, MRI) which you may have
- All current medicines, drugs, tablets, inhalers, injections, herbal remedies, vitamins and other supplements (please bring them in their original containers)
- Insurance "prior approval" letter
- Your Anaesthetic Information Leaflet, to discuss with your anaesthetist

### **Overnight stay or longer**

- Comfortable sleepwear, dressing gown, slippers or footwear and personal toiletries
- Any personal aids such as glasses, hearing aids and dentures
- Reading material or other leisure activities

### **Day-stay**

- Comfortable loose clothing and for children – a change of clothing
- A change of clothing is recommended for children

### **It is advisable that you do not bring**

- Valuables including jewellery and cash as Gillies Hospital is unable to take responsibility for the safe keeping of valuables if brought to hospital.
- Your vehicle, as you will be unable to drive following your procedure/surgery and anaesthetic. We recommend organising transport to and from hospital in advance.

### **Smoke-free**

Gillies Hospital is smoke-free in accordance with the Smoke-free Environments Act.

### **Hospital Payment Arrangements**

You are welcome to contact Gillies Hospital if you have any questions relating to the hospital fees or payment arrangements.

#### ***Requesting a price indication if required***

- Confirm with your surgeon the procedure name and expected length of your surgery and stay in hospital. Gillies Hospital can then provide you with a guide of the hospital costs based on our experience.
- You should also obtain separate price indications from your surgeon and anaesthetist as they are independent of Gillies Hospital and will send separate accounts.

### **Settlement of your account**

#### ***Paying Personally***

- A deposit prior to admission may be requested.
- Settlement of your invoice in full is required prior to discharge.
- Eftpos and credit card facilities are available and cheques are acceptable (daily limits may apply on Eftpos).

#### ***Medical Insurance***

- Obtain "prior approval" – insurance company letter confirming this must be brought with you on admission.
- Any policy excess is payable prior to discharge.

#### ***ACC / Affiliated Provider / Other Contract surgery***

- Gillies Hospital will seek approval for your surgery on your behalf.
- A deposit on admission may be required if your surgery is only partially funded by ACC.
- Any co-payment/excess for other surgery is payable prior to discharge.

### **Prescriptions**

Gillies Hospital provides a service of obtaining your prescription so that the medications are available on discharge. The pharmacy prescription fee is included on your hospital invoice. Please advise the receptionist on admission if you have a Community Service or High User Health Card.

### **The day before surgery**

Please phone Gillies Hospital on **(09) 631 1900**, between the hours of **1.00pm and 3.30pm**, **the business day before surgery.**

This is extremely important as you will be told the time to arrive at the hospital and the time when you must stop eating and drinking. It is also your opportunity to discuss with the nursing staff any medical problems or other concerns that you may have. You will also be advised what you should bring with you on the day. If you are taking any medications the nursing staff will advise you whether you should take these on the day of surgery.

### **The day of surgery**

- Follow the instructions regarding eating (this includes gum and sweets), drinking and taking medication
- Please shower and wash your hair before admission, and remove any nail polish, make-up and jewellery
- If circumstances occur that may delay your arrival at the hospital, we ask that you notify the hospital as soon as possible

### **Your Rights**

Gillies Hospital is committed to delivering your care in accordance with the Code of Health and Disability Services Consumers' Rights.

### **Medical care while in Hospital**

During your stay in hospital our team of competent nurses will provide quality nursing care. Your medical care is the sole responsibility of your chosen specialist. Gillies Hospital does not employ doctors, but it expects your surgeon to visit regularly during your stay. Should the need arise, your surgeon is also expected to be available by telephone and to attend the hospital to provide further prompt specialist assessment or additional medical treatment. In the case of a medical emergency your surgeon will be called and you may be transferred to an emergency, coronary or intensive care service.

Gillies Hospital normally closes from Saturday to Monday morning so occasionally if extended care is required a transfer to another hospital on the Saturday will be arranged.

## When your child is having surgery

Your child's comfort and well-being are important to us. Visiting the hospital before admission to familiarise your child with the surroundings may be a good idea. Please contact us to arrange.

We encourage parents or carers to stay with your child. Please contact the hospital regarding availability of space and associated charges should you want to stay overnight.

On most occasions, we also encourage a parent or carer to be with your child as they start their anaesthetic. Please discuss this with your anaesthetist and surgeon. If you do not wish to, a nurse will stay with your child during this time. We aim to reunite the parents or carer with the child as soon as is appropriate after the procedure when the child has recovered from the anaesthetic.

We suggest you may like to bring a favourite toy and any special items that assist in comforting your child.

Children normally wear their own pyjamas into the operating room. Please bring a change of clothing for your child.

We recommend that you do not bring other children with you to hospital. If this is not possible, you will need to arrange additional support to help you.

A cot and high chair are available on request.



## When you are at the Hospital

### Admission to Hospital

On arrival, please report to the hospital main reception to begin admission and confirm payment arrangements.

A nurse will then complete your admission and prepare you for your procedure/surgery. You may discuss any questions, concerns and personal needs during this time. If you require any additional cultural, spiritual or emotional support please advise the nurse. In consultation with your surgeon and anaesthetist, our nurses will plan your care with you.

Our day-stay areas are designed to comfortably meet the needs of patients admitted for procedures that do not require an overnight stay.

Those who do stay overnight may have an individual or shared room (some rooms have a shared ensuite). All rooms have a telephone, television and radio. Please note, charges may apply to telephone calls. The daily newspaper is available and our meals have been designed to be appetising, nourishing and meet your specific dietary requirements.

### Our checking procedures

Please note that as part of the processes to ensure your safety during your stay, you will be asked to confirm your name and other details several times.

This starts when you arrive at reception, with your admitting nurse and continues when you are transferred to the operating room. Your surgeon, anaesthetist and nurses will also take a short "time out" to complete a final check immediately before your procedure/surgery begins.

### Physical Safety

To ensure a physically safe environment for patients and employees we have eliminated all possible manual lifting by utilising mechanical aids and best practice techniques. To facilitate your treatment, safe positioning and holding methods will be employed. Bed rails are routinely raised to ensure your safety.

The Patient Health Questionnaire includes questions relating to your physical status. Please provide us with any additional details to assist us in planning your care.

# Preparing to go home & after you leave the Hospital

---

Your doctor(s) and nurse will discuss with you arrangements for your discharge from hospital. If you have any concerns regarding your discharge or require assistance please raise it with them. If you have stayed overnight, discharge time is between 9 & 10am.

Please ensure you have made arrangements for someone to drive you home, as it is unsafe for you to drive yourself following anaesthesia or medication.

**If you have not made arrangements for a relative or friend to drive you home following general anaesthesia, sedation, or regional anaesthesia (eg arm block, spinal, epidural) your procedure may be deferred until satisfactory arrangements are made.**

We also recommend that you arrange for an adult to be with you for at least the first 24 hours following your day surgery. Most patients need to rest during this time and you may want additional care at home.

Before you leave Gillies Hospital please ensure you have:

- Your Discharge Information form, including instructions from your surgeon
- Prescriptions, if required for your recovery, and any medications you brought with you
- Made follow up arrangements with your doctor as necessary
- Collected your X-rays and/or scans (CT, ultrasound, MRI)
- Finalised payment arrangements at reception.

## Feedback

Gillies Hospital welcomes all feedback as a means of confirming what we do well and identifying the areas where we could improve. We would appreciate you completing the feedback form, which can be left at the hospital reception or posted back to us.

An on-line feedback form is also available on [www.gillieshospital.co.nz](http://www.gillieshospital.co.nz). You are welcome to contact the Hospital Manager at any time.

## After you leave the Hospital

If you become unwell after you leave the hospital and develop any of the following signs and symptoms:

- Increased pain, redness or swelling in or around the wound
- Excessive bleeding or wound ooze
- Fever or chills
- Nausea or vomiting
- Pain, swelling or tenderness in your calf or thigh
- Chest pain and/or breathlessness
- Any other signs or symptoms that are of concern to you or your family/whanau

**Please call or visit your surgeon or general practitioner immediately.**

**IN THE EVENT OF AN EMERGENCY, CALL AN AMBULANCE IMMEDIATELY (111)**

*Thank you for choosing to come to Gillies Hospital.  
We are committed to excellence in patient care.*

Please ensure all sections are completed fully so that we are able to meet your individual needs and deliver on our promise of quality care.

Please return your **3** completed forms to Gillies Hospital as soon as possible, ensuring that they arrive **one week** before your admission.

These can be either posted, faxed (09 631-1901), emailed to: [bookings@gillieshospital.co.nz](mailto:bookings@gillieshospital.co.nz) or hand delivered to the hospital. If faxing or emailing, please bring original forms on admission.

### Privacy

Any information and personal data gathered for the purpose of your visit to Gillies Hospital is to assist in your treatment, for quality assurance activities and to fulfil legislative requirements. Your rights provided in the Health Information Privacy Code and the Privacy Act 1993 will be respected including your right to access and if necessary, correct any information held about you. If you have any concerns, please contact the Hospital Manager who is the Privacy Officer.

More information on the Health Information Privacy Code and the Privacy Act 1993 can be found at <http://www.privacy.org.nz/health-information-privacy-code/>









Please ensure that this form is returned to Gillies Hospital as soon as possible, and at least one week before admission.

Surname (family name): \_\_\_\_\_ First name(s): \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Telephone / Contact: \_\_\_\_\_

It is important that you answer ALL the questions as accurately as possible. All information is sought to minimise your child's risk and will be retained as part of their confidential clinical records.

**PLEASE FILL IN THE FOLLOWING:**

Child's weight: \_\_\_\_\_ kg

Child's height: \_\_\_\_\_ cm

**DOES YOUR CHILD HAVE ANY:**

Yes No (Please tick Yes or No, Circle a word where appropriate.)

- Allergies to food, medicine, latex, plasters etc
- Asthma
- Cough, cold or chest infection, flu
- Breathing problems
- Kidney or urine problems
- Rheumatic fever or heart problems
- Other medical conditions
- Was your child born prematurely?
- Admitted to the Special Care Unit?

**HAS YOUR CHILD HAD:**

Yes No

- Previous operations
- Had problems with an anaesthetic
- Have family members had problems with anaesthesia
- Been in hospital for other reasons e.g. asthma
- Contact with Antibiotic resistant infectious organisms eg MRSA / VRE / ESBL / Other
- Seizures or fits
- Bleeding problems including family history
- Recent exposure to infectious diseases / anyone with vomiting and/or diarrhoea. See above.

Had a hospital admission in past 6 months (NZ/Overseas)? If Yes, where \_\_\_\_\_

If the procedure requires the removal of any body parts, would you like them returned?

If you have answered YES to any of the above, please give further details below:

\_\_\_\_\_

\_\_\_\_\_

If your child is taking any medication, please list: drugs, tablets, inhalers, injections, herbal remedies, vitamins and other supplements:

\_\_\_\_\_

\_\_\_\_\_

**Special needs:**

Please state the details of any disability, physical or emotional, cultural, family, religious or spiritual needs, special privacy or any other requirements:

\_\_\_\_\_

\_\_\_\_\_

If you have any specific questions for the hospital, please outline:

\_\_\_\_\_

\_\_\_\_\_

Special dietary requirements:  Standard  Vegetarian  Bottle/Breast fed Other: \_\_\_\_\_

\_\_\_\_\_

**DAY STAY PATIENTS:**

Yes No

Do you have access to a phone?

Contact phone number on discharge \_\_\_\_\_

How long does it take you to travel to your local hospital? \_\_\_\_\_

Signed \_\_\_\_\_ (Parent/Guardian) Date: \_\_\_\_\_

Parent's/Guardian's name: \_\_\_\_\_ (Please print)

If your child becomes ill after you have returned this form please contact your surgeon or Gillies Hospital.



Patient Name: \_\_\_\_\_

Your weight: \_\_\_\_\_ Kgs Your Height: \_\_\_\_\_ cm

BMI: \_\_\_\_\_ (if known)

**(Essential for anaesthetic assessment)**

**Yes No**

Any other major illnesses or conditions?

If **YES**, please specify: (e.g. Kidney or liver problems, Thyroid disease, Malignant Hyperthermia).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever had any **allergic reactions** to latex, iodine, medications, plasters, food or any other substance?

If **YES**, please list your **allergies** and describe the **reactions**:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you had an anaesthetic before?

Do you have problems opening mouth?

Have you or any other family member had any problems with an anaesthetic?

If **YES**, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**List all procedures/operations/hospital admissions you have had (start with the most recent).**

Procedures/Operations	Year	Hospital

**Do you have any special needs? If YES, please provide more details.**

**Yes No**

Disability \_\_\_\_\_

Physical support or aids \_\_\_\_\_

Religious or spiritual needs \_\_\_\_\_

Cultural or family/whanau needs \_\_\_\_\_

Dietary requirements: Standard  Diabetic  Vegetarian  Other  \_\_\_\_\_

Food intolerances \_\_\_\_\_

Do you have anxieties, concerns, questions or additional matters you wish to discuss before your surgery with:

Surgeon  Anaesthetist  Nurse  Administration

If your procedure requires the removal of any body parts, would you like them returned?

**Day Stay Patients**

**Yes No**

Do you have someone to drive you home?

Do you have access to a phone?

Do you have a support person to be with you 24 hours post surgery?

How long does it take you to travel to your local hospital? \_\_\_\_\_

Contact phone number on discharge: \_\_\_\_\_

Surgeon's contact details

---

---



*A Surgical Group Ltd & Southern Cross Hospitals Partnership*

160 Gillies Ave, Epsom, Auckland, PO Box 99018, Newmarket 1149

Phone: (09) 631 1900, Facsimile: (09) 631 1901

[www.gillieshospital.co.nz](http://www.gillieshospital.co.nz)