

Welcome to **Mobile Surgical**

This pack is to help you prepare for your visit to the Mobile Surgical Unit. We want to make your experience as comfortable as possible so please take some time to read through this information. We look forward to seeing you soon!

Checklist:

Phone and confirm your appointment time with the site contact
Fill out and return the pre-admission form
Arrange transport to and from surgery
Stop eating according to the instructions provided
Do not send your child to school/childcare on the day of surgery
Bring all current medications

Admission Instructions:

PATIENT'S NAME
DATE OF YOUR SURGERY:
ARRIVE AT:
AM/PM
SITE:
ADDRESS:
CONTACT NAME:
CONTACT PHONE:
Should you have any questions regarding your appointment please phone the above contact.



! IMPORTANT MESSAGE!

Eating & Drinking Instructions:

Please pay close attention to these instructions. If you or your child are not adequately fasted then the surgery will not be able to go ahead. For some surgeries you may be given more specific instructions from your local hospital.

ENDOSCOPY

Eating & drinking:

Follow the eating and drinking information sheet

ALL OTHER SURGERY

Eating:

For appointments in the morning (before midday) the last food eaten should be the evening before the surgery.

For appointments in the afternoon (after midday) the last food eaten should be a light breakfast on the morning of the surgery, no later than 7am.

Drinking:



Routine Pre-Admission Questionnaire

To help us provide the best care possible, please take the time to answer the following questions about yourself/your child. Please return to the sender.

	Affix Patient Label Here						
Title:		Last Name					
		Gender:	NHI Numbe	r (if known): _			
			ne:				
	(7)		Phone:				
				· :			
Name:	·	pany you during your visit? Relationship to y	you:				
Home Phone:		Work Phone:	Mobile:				
Physical/beha	• •	you would like us to consider? //spiritual/communication/interprete		Yes	No		
Do you live al	one?						
Have you arra	anged responsible adult co	ompany for 24 hours after surgery?					
Who will take	you home?						
Are you going	to your home address? If	f no, where will you be going?					
Address:			Phone:				
				Yes	No		
l understand	that I must not drive for 2	4 hours after my anaesthetic (or seda	ation)				
understand		eavy machinery or undertake major d	· ·				
understand		rangements for alternative care wing my procedure.					

MHG Routine Pre Admission Questionnaire (MHG-CM-RPAQ).docx Version 5



WE NEED YOUR HEIGHT AND WEIGHT BEFORE YOU CAN HAVE SURGERY

We	ight:	Kg	/ Stones (ple	ase circle) Heigh	t:	cm or ft. (pl	ease circle)
Yes	/No						
		Are you a diabetic?		☐ Type 1	☐ Type 2	☐ Unsure	
		Do you smoke/vape?	If so	how many per day?			
Ple	ease	list all your current me	dications:				
	-	ou suffered from any o					
Yes	/No		Yes/No		Yes	/No	
		Heart condition		•		☐ Depression/	Nerves
		Chest pain/angina		Migraine		☐ Anaemia	
		High Blood Pressure		Hepatitis/Jaundice	e 🗆	☐ Bleeding dis	orders
		Asthma		Heartburn/reflux		□ Blood clots	
		Shortness of breath		Stomach Ulcers		☐ Kidney disor	der
		Persistent Cough		Vomiting Blood		☐ Alcohol relat	ted problems
		Other lung problems		Epilepsy/fits		☐ Motion sickr	ness
		Rheumatic fever		Stroke blackouts		☐ Arthritis	
Hav	e yo	u or a close relative ever hac	any probler	ns with an anaestheti	c? (please explair)	
Are	you	allergic to any medicines or	other substa	nces (e.g.: iodine, foc	od, cosmetics)		
Hav	/e yo	u worked or been a patient i	n a hospital i	n NZ or overseas in tl	ne last 2 years?		
Do	you l	nave an artificial joint/heart	/alve/pacem	aker?			
Hav	ve yo	u had a recent cold, sore thr	oat, or flu? _				
Are	you,	or could you be pregnant?					
Thi occ	s mea ur. If	/Student Teaching - Medica ans that at times additional r you DO NOT wish to have a by affect the treatment you r I give	nedical staff Iditional me	will be present. We a dical/student staff pro	isk for your permi esent for teaching	ssion should this si	tuation on, this will
l ac	knov	vledge that the above inforr	nation is cor	rect.			
Sign	ned (I	Patient/Legal Guardian)				Date:	

MHG Routine Pre Admission Questionnaire (MHG-CM-RPAQ).docx Version 5

Issued by Chief Executive Authorised by Chief Executive

Before you come for surgery



Important notice: Pre-surgery health check

If you have any of the following conditions we suggest you visit your general practitioner prior to your planned procedure to make sure you are fit for surgery:

- · If you are a smoker
- · If you have diabetes
- · If you take any medication
- · If you have any heart conditions
- · If you have asthma
- · If you have any severe allergies
- · If you are overweight

If you take aspirin, stay on it unless told by someone representing your specialist.

If you take **Warfarin** it will almost certainly be temporarily stopped or replaced. This is very important and needs to be discussed with your specialist. Phone the contact provided in the cover of your information pack.

Your GP will assess your overall health and provide any necessary advice or treatment to help ensure a safe and successful surgery.

Driving:

You must have a responsible adult to drive you home after surgery. You will not be permitted to drive after general anaesthetic or sedation.

Preparation at home:

Please carefully read and follow the instructions written inside the front cover of your information pack about when you can and can't eat and drink. If these instructions are not followed correctly your surgery may have to be delayed or cancelled.

- If a tamaiti/child is having surgery and is nervous we tell them that "the bus is here to make you better."

 Talk to them and let them know that you will be there with them. Tamariki/children are often very keen to look around the truck and in the cab.
- Make sure to wear comfortable, loose clothing and leave jewellery and ear studs at home. Remove nail polish.
- Bring a book, game or something to keep you or your tamaiti/child occupied while you wait for their surgery.



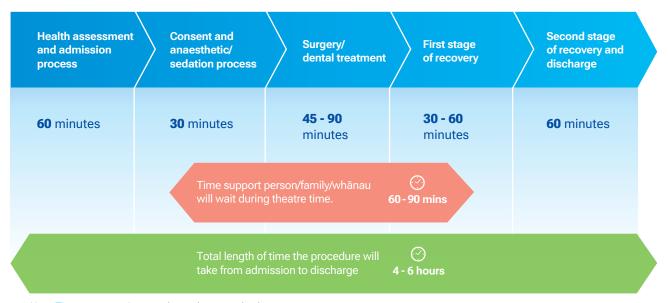
On the day of surgery



Appointment time:

On the day of your appointment, make sure that you keep the whole day free. The time in your admission pack is the time we need you to arrive at the health facility. You may have to wait for a while before surgery but staff will keep you informed.

We appreciate and understand that this may be difficult, especially if you or your tamariki/children have not eaten. Although we try to minimise the wait, it can be hard to estimate how long operations will take.



Note: Times are approximate and may change on the day

Admission and consent:

On arrival at the health facility you will be shown to the waiting area where you will be introduced to one of the nurses on the team. They will admit you for your surgery and after that you will be seen by your surgeon and anaesthetist. They will discuss your surgery and anaesthetic with you, and give you the opportunity to ask any questions.

Once this is done they will ask you to sign the consent form which means surgery can then go ahead.

Surgery:

The clinical team will come and get you when it is time for your surgery. A support person is welcome to accompany you onto the surgical unit.

Parents or guardians may stay with their tamaiti/child onboard while they go to sleep, but once they are asleep, the caregiver present will be asked to leave. This is to ensure the safety of both the patient and the caregiver during surgery and also ensures there is enough space for the clinical team to complete the operation safely.

Anaesthetic information



Who is my anaesthetist?

An anaesthetist is an experienced specialist doctor. They administer your anaesthetic, make sure you are safe during your surgery and comfortable afterwards. Your anaesthetist will talk to you before the surgery and let you know everything that will happen that day.

The anaesthetist looking after you is going to ask you some questions about your history so they can give you the best care. Anything that you tell the anaesthetist, the surgeon or the nurses will remain completely confidential.

They will ask you about:

- Any history of drug allergies or problems with anaesthetics that you or your whānau/family may have had.
- Any illnesses or medical conditions in your whānau/family.
- Any illnesses that you have or medications that you are on. If you regularly take medication or use an inhaler, please bring them with you and show the anaesthetist if required/requested.

They will stay with you throughout your operation, maintaining your medication and keeping an eye on you.



What do I do before my anaesthetic?

There are instructions about when you can and can't eat and drink written inside the cover of this pack. Please make sure that you follow them. It is vitally important that you have an empty stomach before your surgery.

What will happen?

Once your anaesthetist has spoken to you and you feel comfortable you will wait to be taken into the theatre on the surgical unit. Your anaesthetist and the theatre team will help you to lie down on the operating table while they connect you to the anaesthetic machine. You may also be asked to breathe through an oxygen mask while the anaesthetist gives you your anaesthetic.

There may seem to be a lot of people in theatre but everyone has a job to do and it is all about looking after you.

Types of anaesthetic:

On the mobile surgical unit we use a number of different types of anaesthetic. The type of anaesthetic you receive depends on your surgery.

- General anaesthesia (GA) this anaesthetic will put you to sleep for the whole operation.
- 2. Regional anaesthesia the anaesthetist makes a region of your body numb so you won't feel anything during your surgery, even though you will be awake.
- Local anaesthesia (LA) the anaesthetist will numb a small area where you will receive surgery.
- 4. Monitored sedation your anaesthetist or surgeon uses a special range of drugs to keep you comfortable and sleepy but still able to respond to questions if needed.

Waking up

You will wake up in our recovery area where one of our nurses will look after you and monitor you.

When you feel well enough and are more comfortable you will be taken into the health facility where we will give you sips of water and a cup of tea or coffee.

You will stay in the day ward until you feel well enough to be discharged.

After surgery



When can I go home?

After surgery you will be taken to a quiet area inside the health facility to recover. You will be discharged once the doctor or nurse says you can go home.

Discharge information

After surgery we will give you a copy of your operative record. Take this with you if you need to visit your GP. The nurse may give you some specialist post-operative instructions and will tell you if you need an appointment for a follow-up.

We may also give you a prescription for medication to take after your surgery. It is important you collect your prescription quickly and follow the instructions closely. If you are unable to get the medication, please let the staff know.

The hospital or Health NZ - Te Whatu Ora district may contact you the following day. You may receive a follow-up text from Mobile Surgical four weeks after surgery.

Getting home after your operation

Please ensure you have arranged for someone to drive you home because you are not allowed to drive after anaesthesia or medication. If you live alone you should try and stay with someone overnight, in case you feel unwell. We recommend you have an adult stay with you for 24 hours after surgery.

Taking care after your operation

Remember: If you have had a general anaesthetic or sedation you must not operate any machinery, drive or make important decisions or sign legal documents for at least 24 hours.

Pain relief

If the nurse has given you a prescription take this as directed for pain relief. Otherwise, take paracetamol (Panadol/Pamol) to control pain, and follow the directions on the packet.



IMPORTANT:

If you are concerned following surgery, contact your GP, after hours or dial 111.

If you need to speak to a surgical unit nurse, please call 0800 733 677.

SEEK ASSISTANCE IF ANY OF THE FOLLOWING OCCUR

- · Severe pain, increased or excessive swelling.
- · Persistent discharge or excessive bleeding.
- Progressive heat and redness of the skin around the wound with increased pain and chills or fever.
- Difficulty moving.
- · Pain, swelling or tenderness in calf or thigh.

Your rights

We strive to uphold your rights as outlined by the Health and Disability Commissioner. If you feel your needs haven't been met, please contact us on 0800 544 111.

For independent and confidential support, reach out to the Nationwide Health and Disability Commissioners Advocacy Service at 0800 555 050.

Your information

You can access your patient notes anytime by contacting us. For further information, you'll be directed to the relevant Health New Zealand district.





NAME:		NHI:
GENDER:	_ DOB: _	HOSPITAL:(Attach Patient Label or Complete Details)

PATIENT CONSENT AGREEMENT

	PROCEDURE			
I, (patient's/guardian's full name)				
agree to have the following procedure:				
<u> </u>				
Specify side performed on myself/r	ny child (please circle)			
ponomina on mycom	ny orina (piedoe enero)	(name of patient, if	patient not signing	form)
I also agree to such further or alternative operative meal have read and understood the information and implica		necessary during th	e course of the p	orocedure.
Dr (print) (Desig	nation)	whose s	signature anneai	rs helow has
explained to me the reasons for, and the possible risks and have received all the information that I want. I und	s of the procedure, and I	have had adequate	e opportunity to a	ask questions
Sedation / Anaesthesia / Proposed Anaesthesia:	Local General	Conscious Sedation	on 🗌 Regional	Block
Staff Exposure to Blood or Body Fluids - I understarmy blood or other body fluids, I agree to blood samples transmissible diseases as are considered of significant testing and the results, if I request them, and of any ap the health professionals involved.	being taken. These sar risk, eg. Hepatitis and H	nples will be tested IV. I understand that	only to identify s at I will be inform	such ned of such
Body Tissue/Body Parts - Do you have any specific r	equirements for the retur	n or disposal of boo	ly tissue/body pa	arts?
Data Collection - We retain information for our confidencere. I have been advised that I / my child / my ward n				
Medical/Student Teaching – Our Medical staff are ac additional medical/student staff present for teaching du			for your permis	sion to have
			Yes	No 🗌
SIGNED:	(PATIENT/PARENT/GUA	RDIAN) DATE:		
SIGNED:	(DOCTOR)	DATE:		
The Mobile Surgical Unit provides services in rural communit The skilled healthcare team in charge of your care have man if you have any questions or concerns relating to the risks be prior to your procedure or talk to a staff member on the day.	aged this risk by assessing	you as appropriate foi	r treatment on the	unit. However,
	ANAESTHESIA			
Dr (print) (Desi	gnation)	whose	signature appea	rs below. has
explained to me the reasons for, and the possible risks and have received all the information that I want. I uncanaesthesia being administered to me / my child / my v	of the anaesthesia, and lerstand that I am welcor	I have had adequate	e opportunity to	ask questions
I acknowledge that I / my child / my ward should not drived drink alcoholic beverages, or make important decisions sedative agents administered. I have read and understand anaesthesia.	ns for 24 hours after ha	ving had a general	anaesthetic and	d/or opioid or
SIGNED:	(PATIENT/PARENT/GUA	RDIAN) DATE:		
SIGNED:	(ANAESTHETIST)	DATE:		

Making a difference

Mobile Surgical works in partnership with Health New Zealand - Te Whatu Ora and your local health professionals to provide low risk, elective day surgery for rural New Zealanders.

The service has been operating since March 2002 and since then we have treated over 33,000 patients, primarily in rural New Zealand.

EQUITABLE ACCESS TO HEALTHCARE

The Mobile Surgical Unit – Te Waka Hauora, provides patients with the opportunity to receive treatment in their own community, close to their family/whānau and their support people. This has many benefits including removing the burden of travel and accommodation.

Chris Heath, anaesthetic technician, based in Wanaka says "All Kiwis deserve access to quality healthcare no matter where they live, so bringing our surgical unit to their local area is very much appreciated by the local communities – they tell us this time and time again."



Chris Heath, anaesthetic technician, Mobile Surgical



About us

Mobile Health Group operates a fleet of specialised healthcare vehicles, making health services accessible everywhere in Aotearoa New Zealand. We believe no matter where they live, people will be able to access the medical care they need.



Mobile Surgical

Day surgery for rural New Zealand **mobilesurgical.co.nz**

In addition to the surgical unit we also operate:



Mobile Medical

Non-invasive kidney stone treatment **mobilemedical.co.nz**



Mobile Imaging

PET-CT imaging for regional communities **mobileimaging.co.nz**



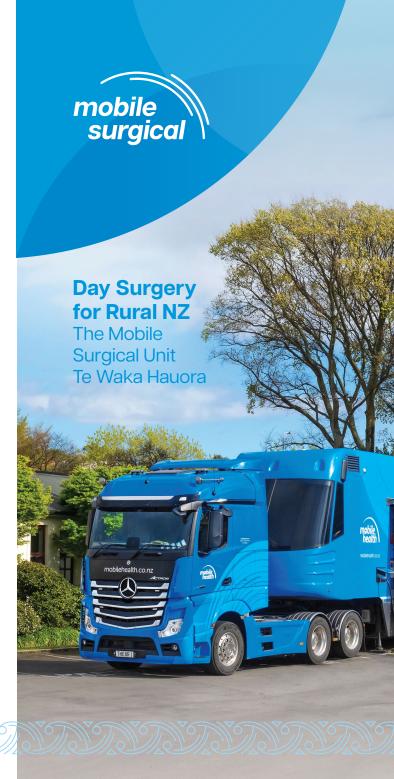
My Health Hub

Education for health professionals **myhealthhub.co.nz**

Mobile Health Group

Suite 4, 6H Sir William Pickering Drive PO Box 39188, Christchurch 8053 03 977 4524 info@mobilehealth.co.nz **mobilehealthgroup.co.nz**





What we do

We provide low risk elective day surgery in rural communities which do not have local access to a full operating theatre.

Patients are referred by their local GP to their district hospital who place them on the mobile surgical unit operating list where appropriate.

The unit is equipped for a wide range of specialties including:

General surgeryOrthopaedics

Dental

Orthopaedics • Endoscopy

Gynaecology

Plastic surgery

Virtual tour: mobilehealth.co.nz/tour

Our team

The surgical team includes eight clinical staff:



The surgeon and anaesthetist have overall responsibility for your care.



An anaesthetic technician and a clinical nurse leader co-ordinates the day and oversees the local nursing team.



Four nurses from each rural town work as scrub nurse, circulating nurse, and recovery and discharge nurses.

The team is supported by a steerologist (driver) who sets up and oversees the surgical unit.







Where we go

The surgical unit travels to 27 rural locations on a 5-week cycle which includes three weeks in the North Island and two weeks in the South Island. Each evening the surgical unit is packed up and driven to the next town.





. Taumarunui

Tokoroa



Kaikohe Dargaville Whangārei Pukekohe



Te Puia F Wairoa Mapier G Waipukurau E Dannevirke Ceatherston



Rangiora Ashburton Oamaru Balclutha Gore



Clyde Queenstown Greymouth Westport Motueka Takaka