

## All you need to know about your stay

**Tear-off forms** at the front of this book are for you to complete





## Welcome Nau mai, haere mai

During your stay here you can expect the highest level of care from our dedicated team. We work closely with your specialist who will direct and plan your treatment. We are wholeheartedly committed to providing friendly, personalised care and professional guidance through every step of your journey.

Because A Better Health Journey for you, is what matters the most to us.

### **Admission instructions** Your operation/procedure is booked for Date: Allevia Hospital Ascot: ○ Morning ○ Afternoon ○ Evening ○ Inpatient ○ Day stay Please arrive on OAM OPM | Time: Date: **Fasting instructions** Do not eat or chew anything after $\bigcirc$ AM $\bigcirc$ PM Do not drink anything after OAM OPM Date: Make sure you send us your forms at least one week prior to your admission.

#### **Inside this booklet**

You'll find all the information you need for your admission, your stay with us and your recovery. And if you have any remaining questions, we're here to help however we can.

#### **Checklist**

$\bigcirc$	Read this booklet. It has all the information you need about the steps that follow. Ask a friend or whānau member to read it too.
$\bigcirc$	Watch our patient experience video on our website alleviahospitals.co.nz
$\bigcirc$	If you are paying for your procedure and/or have a private health insurance approval shortfall, payment is to be made on or before admission.
$\bigcirc$	So that you're aware of any payment or possible balance of payment, please call our Customer Support team so we can give you an estimate of our costs.
$\bigcirc$	Obtain your prior approval letter (if you have health insurance), and forward it to the hospital with your forms <b>at least one week</b> prior to your admission.
$\bigcirc$	Complete the <b>Patient registration form</b> (see pages 5–6).
$\bigcirc$	Complete your <b>Patient health questionnaire</b> (see pages 7–12).
$\bigcirc$	Complete the <b>Consent for operation/procedure</b> with your specialist (see page 13).
$\bigcirc$	Send your forms to Allevia Hospital Epsom or Ascot (see page 15):
	<ul> <li>The hospital must receive your forms at least one week prior to your admission.</li> <li>We can receive these forms by email, in person, by courier or by post.</li> <li>Please ensure you allow at least two weeks for postage to be delivered to us.</li> </ul>
$\bigcirc$	Check your surgery date and admission time (see page 2). If you have not already received your admission time, please contact your specialist's rooms as soon as possible.
$\bigcirc$	Check any specific pre-admission instructions from your specialist (see page 16).
0	Plan for any additional support following your discharge e.g. someone to stay with you for the first 24 hours, home nursing services or rehabilitation services. Discharge time is <b>10am</b> (see pages 16 and 18).
$\bigcirc$	Arrange transport to and from the hospital (see page 18).
$\bigcirc$	Pack everything we need you to bring, including all the medications you are currently taking (see page 16).

	My operation/procedure is booked at:	Allevia Hospital Epsom Allevia Hospital As							
	Patient details (to be completed by pat	tient)							
	Title (please circle): Mr Mrs Ms Miss Dr O	Other Date of birth: / /							
	Legal first name(s):								
	Family name:								
	Previous name:								
	Sex:	Is this the same as your birth gender? Yes No							
		If 'no', what was your gender at birth? Male Female							
	Country of birth:	NZ resident: Yes No NHI number (if known):							
	Residential address:								
)	Postal address (if different from above):								
)	Preferred contact number: ( )								
	Email:								
	Ethnic group:	Language spoken:							
	Interpreter required: Yes No (Interpreter services must be arranged through your specialist's rooms prior to admission)								
	If visiting from overseas what is your address while	, 3							
		Phone: ( )							
	Emergency contact person								
	Name:	Preferred contact number: ( )							
	Relationship to patient:								
	Health insurer								
	Name of insurer:	Policy type:							
)	Membership number:	Prior approval number:							
	Is your surgery covered by ACC? Yes No	ACC approval granted: Yes No							
	ACC claim number:								
	CD	Referring inedical practitioner							
	GP	(If different from GP)							
	GP Name:								
		(If different from GP)							
	Name:	(If different from GP) Name:							

PAGE 1 OF 2 - CONTINUED ON NEXT PAGE. PLEASE DETACH & SEND TO ALLEVIA HOSPITALS. IF SCANNING & EMAILING SEND BOTH SIDES. 5

#### **Patient registration form** (continued)

#### **ACC claims**

#### Contract claim:

If your medical operation/procedure is an ACC contract claim, ACC will pay the hospital directly for all hospital and specialist's costs excluding personal expenses. Personal expenses, such as visitor meals, will be invoiced directly to patients post-discharge.

#### Part ACC/part insurance:

Proof of prior approval is required prior or on admission for the portion of your procedure that is covered by insurance. If you are not insured, you will be required to pay a portion of the estimated hospital costs prior or on admission. For further details on ACC reimbursement practices, please ask your ACC case manager.

#### Payment of hospital costs

or further information please refer to the patient information booklet.					
Payment will be made by:	Credit card	Internet banking	EFTPOS	Cash	Other

- If you have no insurance you will be required to pay the full estimated cost of the operation/procedure on or before admission.
- · If internet banking is done within three days prior to your admission, you will need to provide proof of the transaction prior to admission.
- We strongly recommend you contact our Customer Support team 09 623 6588 (Allevia Hospital Epsom) or 09 520 9575 (Allevia Hospital Ascot) for an estimate of the hospital costs prior to admission.
- · If you have prior approval with a private health insurer, you will need to pay any expected shortfall on or
- · You understand and give consent that relevant information may be supplied to an external credit reporting agency to obtain a credit report.
- · You agree you are responsible and will pay for all costs incurred in connection with your treatment.
- · You understand that Allevia Hospitals may notify a credit reporting agency and/or instruct a debt collection agency should you default on any payment due by you to Allevia Hospitals.
- · You understand that any collection and/or legal costs incurred in recovering any debt will be charged to you.

#### Personal property

You understand and agree that Allevia Hospitals is not and will not be responsible for loss of or damage to any personal property (including jewellery, dentures, watches, rings, glasses) which you may bring into the hospital.

#### **Sharina information**

You consent to Allevia Hospitals sharing relevant information that is related to your healthcare and as required by third parties such as health insurers, medical specialists, ACC, and for quality and audit purposes.

To the best of your knowledge the information you have supplied to Allevia Hospitals is correct.

Signature:									
Print name (ii	in full):				Date:	/	,	/	

Please return this form at least one week prior to your operation/procedure date

You can email this form or see page 15 of patient information booklet for more details.

Allevia Hospital Epsom csepsom@allevia.co.nz

**Allevia Hospital Ascot** csascot@allevia.co.nz

Patient health auestionnaire

Allevia

Allevia Hospital Ascot

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Please return this form <b>at least one week</b> p	prior to your operation/procedure date	

Allevia Hospital Epsom

Dear Patient

The information requested in this form will help us assess your needs and plan your care for your booked admission to Allevia Hospitals. All information will be treated in strict confidence.

When answering the questions, please do not write 'see my notes' or words to the same effect because we will not have all your clinical notes. Please answer as accurately as possible.

Please answer **all questions** on each page even if you think they are irrelevant to your circumstances.

Please bring any relevant X-rays/CT/MRI scans (CD discs) with you along with any mobility aids, CPAP machines etc. to the hospital. If you develop any coughs, colds, infections or wounds before your admission, contact your specialist prior to your admission.

Please ensure you are aware of when you should stop eating and drinking prior to your admission. Your specialist should advise you of these times. Please note this includes chewing gum, Iollies, sugar etc. If you do not follow these instructions, you risk having your surgery cancelled.

We look forward to helping you prepare for your operation.

My operation/procedure is booked at:

**Admissions Unit nurses** 

Substance

Patient details			
Legal name:			Date of birth: / /
Planned procedure:			
Date of surgery:	/	/	Best contact ( )

Height:	cm	Weight:	kg	This information is important. <b>Do not leave this blank.</b> If you do not know, an estimate is acceptable.
---------	----	---------	----	---------------------------------------------------------------------------------------------------------------

		$\neg$
Do you have any allergies?	No	

Reaction

Are you allergic/sensitive to any: (circle which and describe below)

Medications	Foods	Latex	Plasters/tape/skin preparations (e.g. iodine, chlorhexidine)

Other

**Allevia**Hospitals

Please list <b>ALL</b> medicines – tablets, inhalers, pato		(O) Or over the counter
include any herbal or natural remedies). <b>If you</b>		
Name of medication	Dose	Frequency
		. Jah
Please bring all your medication		
to you take any of the below blood thinning med		Yes No L
		atran (Pradaxa) Rivaroxaban (Xarelt
Apixaban (Eliquis) Ticagrelor (Bri		damole (Pytazen) Prasugrel (Effient)
Has your specialist advised you to withhold th		erv? Yes No T
If ' <b>yes</b> ', please provide details:	ils medicanon prior to your sarge	ery: res no
	upped and the second at making the	en 7 mantha?
lave you been taking opioids (i.e. morphine, oxy	readone) for a period of more inc	an 3 months? Yes No
If 'yes', which medicine/s:		
Do you take any medicines to treat opioid deper i.e. naltrexone) or to aid in smoking cessation or		
If 'yes', which medicine/s:		
Have you ever had: MRSA ESBL	VRE CRE	Other multi-resistant organisms
None of these Appro		
lave you been a patient or worked in an <b>overse</b>	as hospital in the last 12 months?	? Yes No
If 'yes', which country:		Approximate date:
Have you been a patient for one or more nights	in any <b>New Zealand</b> hospital in t	the last 12 months? Yes No
If ' <b>yes</b> ', when:	Hospital/s:	
Have you been a resident in a rest home or long-		cility) Yes No
n the last 12 months (excludes independent living		
Have you lived or travelled outside of New Zeala		
If 'yes', which countries:	Approx. date of return or	arrival to New Zealand:
o you have a history of CJD or other prion dise	ase in your family (including 1st &	& 2nd degree relatives)? Yes No
If ' <b>yes</b> ', please provide details:		<u>a ina aog.oo rolameey.</u>
Have you received human growth hormone or go	onadotropin treatment prior to 10	986? Yes No
,		Date:
If ' <b>yes</b> ', please provide details:	JUS	Date:
	10?	Date:  Yes No Date:

## Patient health questionnaire (continued)

**Allevia**Hospitals

Please list **all** previous admissions to hospital for surgical procedures. Please include where and when (estimate if unsure).

Previous surgery	Hospital		Year
lave you suffered post-op nausea and vomiting w	vith recent surgeries?		Yes No
If ' <b>yes</b> ', please provide details:			
lave you or a blood relative ever had any problem .g. malignant hyperthermia, muscular dystrophy	ns during or after anaesthesia?		Yes No
If ' <b>yes</b> ', please provide details:			
roblems opening your mouth?			Yes No
If ' <b>yes</b> ', please provide details:			
re you or could you be pregnant?			Yes No
If ' <b>yes</b> ', please provide details:			
	ed any of the following?		
Do you have, or have you ever ha	ia, any or the following:		v 🗆 n
ligh blood pressure controlled with medication:			Yes No
If ' <b>yes</b> ', please provide details:			Yes No
If 'yes', please provide details:		Date:	Yes No
leart murmur:		Dale.	Yes No
If ' <b>yes</b> ', please provide details:			103110
urtificial heart valve:			Yes No
If ' <b>yes</b> ', please provide details:		Date:	
thest pains/angina:			Yes No
If ' <b>yes</b> ', please provide details:		Date:	
foronary angiogram or stents in the heart:			Yes No
If ' <b>yes</b> ', please provide details:		Date:	
heumatic fever:			Yes No
If ' <b>yes</b> ', please provide details:		Date:	
trial fibrillation/palpitations/arrhythmias:			Yes No
If ' <b>yes</b> ', please provide details:			
ardiac devices e.g. pacemaker, ICD:			Yes No
If 'see' places provide details:			
If ' <b>yes</b> ', please provide details:			Yes No
lave you seen a heart specialist doctor/s in the la			165 110
	st 5 years:  When did you last see them	n:	165 140
lave you seen a heart specialist doctor/s in the la		n:	Yes No
lave you seen a heart specialist doctor/s in the la  If ' <b>yes</b> ', please specify:		1:	

Patient health questionnaire

# Patient health questionnaire

10 PATIENT INFORMATION

Patient health questionnaire (continued)

**Allevia**Hospitals

Persistent cough:			Yes	No	
If ' <b>yes</b> ', please provide details:					
Shortness of breath:			Yes	No	$\Box$
If 'yes', please provide details:					
Obstructive sleep apnoea:			Yes	No	
If 'yes', do you use a CPAP or other sleep apnoea device?			Yes _	] No	$\Box$
Have you had a 'headcold', throat/chest infection or bronchitis in the 4 weeks prio	or to admission?		Yes	No	
If ' <b>yes</b> ', please provide details:		Date:			
Stroke/TIA:			Yes	No	
If 'yes', please provide details:		Date:			$\overline{}$
Anaemia:			Yes	No	$\Box$
If 'yes', please provide details:					$\overline{}$
Bleeding disorders:			Yes	No	$\Box$
If 'yes', please provide details:					$\dashv$
Blood clots in legs or lungs (DVT/Pulmonary embolism):			Yes	No	一
If 'yes', please provide details:		Date:			
			V [		
Epilepsy/seizures:			Yes	No	
If 'yes', please provide details:	Last seizur	е аате:		٦ ,.	$\dashv$
Blackouts/fainting:		Б	Yes	No	ᆜ
If ' <b>yes</b> ', please provide details:		Date:			
			Yes	No	
Diabetes:  Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)	(Jardiamet)		Yes	_	(iga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin	None of the			_	kiga)
Type 1 Type 2  If ' <b>yes</b> ', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)	None of the		agliflozir	n (For	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:	None of the		agliflozir	n (For	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:	None of the		agliflozir Yes	No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:	None of the		agliflozir Yes	No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:	None of the		Yes Yes	No No	kiga)
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Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  Hepatitis:  If 'yes', please provide details:	None of the		Yes Yes	No No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:	None of the		Yes Yes	No No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:	None of the		Yes Yes Yes	No No No	kiga)
If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger  If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  Hepatitis:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:  HIV/AIDS:	None of the		Yes Yes Yes	No No No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:  HIV/AIDS:  If 'yes', please provide details:	None of the		Yes Yes Yes Yes	No No No No	kiga)
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Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:  HIV/AIDS:  If 'yes', please provide details:  Tuberculosis:  If 'yes', please provide details:  Mental illness:	None of the	ese	Yes Yes Yes Yes	No No No No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:  HIV/AIDS:  If 'yes', please provide details:  Tuberculosis:  If 'yes', please provide details:  Mental illness:  If 'yes', please provide details:	None of the	ese	Yes Yes Yes Yes	No No No No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:  HIV/AIDS:  If 'yes', please provide details:  Tuberculosis:  If 'yes', please provide details:  Mental illness:  If 'yes', please provide details:  Anxiety:	None of the	ese	Yes Yes Yes Yes Yes Yes Yes	No No No No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  Hepatitis:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:  HIV/AIDS:  If 'yes', please provide details:  If 'yes', please provide details:  Mental illness:  If 'yes', please provide details:  Anxiety:  If 'yes', please provide details:	None of the	ese	Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger  If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  Hepatitis:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:  HIV/AIDS:  If 'yes', please provide details:  Tuberculosis:  If 'yes', please provide details:  Mental illness:  If 'yes', please provide details:  Anxiety:  If 'yes', please provide details:  Depression:	None of the	ese	Yes Yes Yes Yes Yes Yes Yes	No No No No	kiga)
Type 1 Type 2  If 'yes', do you take any of the following medications?  Insulin Empagliflozin (Jardiance) Empagliflozin + Metformin  Canagliflozin (Invokana) Dapagliflozin + Metformin (Xigduo XR)  Has your specialist advised you to withhold this medication prior to your surger If 'yes', please provide details:  Kidney problems:  If 'yes', please provide details:  Hepatitis:  If 'yes', please provide details:  Liver cirrhosis:  If 'yes', please provide details:  HIV/AIDS:  If 'yes', please provide details:  If 'yes', please provide details:  Mental illness:  If 'yes', please provide details:  Anxiety:  If 'yes', please provide details:	None of the	ese	Yes Yes Yes Yes Yes Yes Yes Yes	No No No No No	kiga)

## Patient health questionnaire (continued)

**Allevia**Hospitals

Λrd	rhritis:	Yes		اما	=
		ies [	'	10	=
	If 'yes', please provide details:	Vaa [		la l	_
	int implants or metalware:  If ' <b>yes</b> ', please provide details:	Yes		10	=
					_
	you currently use: utches:	Yes		No	_
	If <b>'yes</b> ', please provide details:	163	'	10	=
	alking stick:	Yes		No	=
	If 'yes', please provide details:				=
	alker or frame:	Yes	1	No	=
	If ' <b>yes</b> ', please provide details:				
Wh	neelchair:	Yes	1	No	=
	Do you require any assistance to transfer?	Yes	1	ا ol	
	If ' <b>yes</b> ', please provide details:				
Ha	ve you had any falls within the last 6 months?	Yes	1	No	-
	If 'yes', please provide details: Date:				
He	artburn/reflux:	Yes	1	No	
	If ' <b>yes</b> ', please provide details:				
Во	wel conditions:	Yes	1	No	
	If ' <b>yes</b> ', please provide details:				
Blc	adder conditions:	Yes	1	No	
	If ' <b>yes</b> ', please provide details:				
Cu	rrent skin problems e.g. ulcers, wounds, eczema, boils:	Yes [	1	Vo	
	If 'yes', please provide details:				
Do	you have difficulty with your sight, hearing or communication?	Yes	1	No	
	If 'yes', please provide details:				
	you have any other medical conditions not already covered, or is there anything else should know about you e.g. Parkinson's, muscle/nerve disease?	Yes [	1	No	
)	If ' <b>yes</b> ', please provide details:				
Do	you or have you ever smoked?	Yes		No	
	If 'yes', how much? For how long? When did you give up?				
	you or have you ever vaped?	Yes	1	No	
	w often did you have a drink containing alcohol in the past year?	L			
	Never Monthly or less 2–4 times a month 2–3 times a week 4 or more times	nes a	week		
Но	w many standard drinks containing alcohol do you have on a typical day when you are drinking?				
	] 1–2				
Но	w often do you have 6 or more drinks on one occasion?				
	Never Less than monthly Monthly Weekly Daily/almost	t daily			
Do	you use recreational drugs?	Yes	1	No	
	If ' <b>yes</b> ', what type? How often?				
Do	you have any special dietary requirements?	Yes	1	No	
	If 'yes', please provide details:	L			
	you have any religious beliefs/practices or cultural needs we should be aware of?	Yes	1	No	
	If ' <b>yes</b> ', please provide details:	L			-

## Patient health questionnaire

Patient health questionnaire (continued)

**Allevia**Hospitals

#### **Discharge planning**

Being prepared for your discharge is just as important as being prepared for your admission. As part of your discharge plan we will anticipate the day of discharge prior to your arrival at the hospital. This will relieve your anxiety and help you be ready for your discharge home.

You will need someone to stay with you for 24–48 hours after discharge.

This may be lo	onger dependi	ng on your surge	ry.								
Please complet	te the section be	elow so we can se	e what	care and	supp	ort you wi	ll need to ensu	ıre a sa	fe and s	peedy	recover
Carer sup	port										
Current living o	-										
Live al	one Live	e with others i.e. po	artner/	children							
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Name:						1	Relationship:				
Do you have co	aring responsib	ilities for others at	home?	?					Yes		No
If ' <b>yes</b> ', plec	se provide deta	ails:									
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It is important	to know <b>who</b> h	as <b>completed this</b>	form.	Please pr	int a	nd sign yo	ur name.				
Name (print):							Date:		/	/	/
Signature:											
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I am the:	Patient	Legal guardian		Parent		Other (sp	ecify):				

Please return this form **at least one week** prior to your operation/procedure date

You can email this form or see page 15 of patient information booklet for more details.

Allevia Hospital Epsom csepsom@allevia.co.nz

Allevia Hospital Ascot csascot@allevia.co.nz

## Consent for operation/procedure

**Allevia**Hospitals

Patient details										
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Date of admission:	/	/	Time:			NHI numbe	r:			
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## **Patient information**

#### **Before your admission**

Please read this booklet. It covers all you need to know about every step of your stay with us. Ask the friend or whānau member who is going to be your support person to read it too. Make sure to watch our patient experience video on our website alleviahospitals.co.nz

#### **Registration information**

There are three patient forms for you to complete on pages 5–13 of this booklet.

#### **Informed consent**

You will complete the consent for operation/procedure form together with your specialist. This may be done prior to your admission or when you arrive at the hospital. If you have the consent form, please bring this with you on the day of admission or send it to us in advance on <code>csepsom@allevia.co.nz</code> for Allevia Hospital Epsom or <code>csascot@allevia.co.nz</code> for Allevia Hospital Ascot. Completing the consent form confirms you've received all the information you need to make an informed choice and that you've agreed to your operation/procedure. It also includes consent for blood sampling, in the event of a Allevia Hospitals employee receiving a needle stick injury or other blood accident during your operation/procedure.

#### **Patient registration**

Please complete all the questions on the patient registration form, including any insurance or payment details i.e. private health insurance, self-insured, ACC or DHB contract details.

#### **Prior approval**

If you have private health insurance, please get approval from your health insurance company at least one week before your operation/procedure to ensure you are clear on what is and isn't covered under your policy.

Your insurance company will give a 'prior approval number', which should be included on your patient registration form. Please attach your prior approval letter with your completed forms from this booklet.

#### Patient health questionnaire

Please complete all the questions on the patient health questionnaire.

#### We're here to help.

If you have any questions at all about the admission process, forms or costs, our Customer Support team will be happy to assist you on:

& 09 623 6588 (Allevia Hospital Epsom)

#### 

#### Send us your forms

Please remove the completed forms from this booklet and send them straight away to Customer Support at Allevia Hospitals, in one of the following ways:

#### Allevia Hospital Epsom:

- Scan and email: csepsom@allevia.co.nz
- Courier to reception
- In person to reception (Mon-Fri, 6am-5pm) at 98 Mountain Road, Epsom
- Post to Allevia Hospital Epsom, PO Box 9911, Newmarket, Auckland 1149

#### **Allevia Hospital Ascot:**

- Scan and email: csascot@allevia.co.nz
- · Courier to reception
- In person to reception (Mon-Fri, 6am-5pm) at 90 Green Lane East, Remuera
- Post to Allevia Hospital Ascot, Private Bag 28905, Remuera, Auckland 1541

The forms must be received by Allevia Hospitals at least one week before your proposed admission date. Please ensure you allow at least two weeks for postage as this service is slow.

Returning this information in advance means we can better plan for your surgery and confirm all your relevant health details. If you have any questions, please feel free to contact us directly by calling 09 623 6588 (Allevia Hospital Epsom) or 09 520 9575 (Allevia Hospital Ascot).

If emailing please remember to bring the original forms with you on your admission to hospital.

#### Anaesthesia

Your specialist will have given you a leaflet about anaesthetics. Before admission, your anaesthetist may call you to talk about your current health and any anaesthetic-related questions.

#### Contact from the hospital

To help you be completely prepared for your operation/procedure you may:

- Receive a phone call from one of our Customer Support team regarding any administration queries or hospital payment required prior to surgery.
- Receive a phone call from one of our pre-admission nurses to clarify the information you provided on your patient health questionnaire. This will depend on your planned surgery and/or your medical history.
- Be invited to attend a pre-admission appointment where the nurses will coordinate your admission preparation. You may also meet one of our Customer Support team at this time to discuss your hospital charges and health insurance cover/payment.

#### **Pre-payment**

#### Patients covering the full cost of their procedure:

Patients without prior approval will be requested to pay the total estimated hospital costs on or before admission and pay a balance payment after your discharge. Please see 'Your account' on page 20 for more information.

### Patients with medical insurance and prior approval for their procedure:

Patients who have prior approval from a private health insurer will be requested to pay the expected shortfall and/or co-payment on or before admission and pay a balance payment after your discharge. Please see 'Your account' on page 20 for more information.

So that you're aware of any payment or possible balance of payment, please contact our Customer Support team so we can give you an estimate of our costs.

#### Allevia Hospital Epsom:

**©** 09 623 6588

□ csepsom@allevia.co.nz

#### **Allevia Hospital Ascot:**

**©** 09 520 9575

□ csascot@allevia.co.nz

#### Information about your regular medications

We're committed to providing the safest and highest quality care possible. To make sure this is always the case, we need accurate information about the medications you take at home. Ask your GP to give you a list of your current medications, to bring with you.

Please discuss with your specialist or anaesthetist whether you should take your regular medications on the day of surgery.

#### Herbal medications and dietary supplements

Herbal medications and dietary supplements can interact with the drugs we may prescribe you. We recommend that wherever possible, you stop taking them at least one week before your operation.

#### Planning for your discharge

Your specialist will let you know if they think you'll need extra support when you leave hospital. This might be a home nursing or rehabilitation service – especially if you live alone. These services need to be arranged through the specialist's rooms before your admission.

For your safety and wellbeing you will not be allowed to drive for 24 hours after your operation/procedure and someone should be at home with you when you leave hospital. Please discuss this with your specialist or GP prior to surgery.

#### On the day of your admission

#### Your specialist's instructions

It's important to follow any pre-surgery instructions from your specialist, especially any around medication or fasting (no eating or chewing).

Please also have a bath or shower.

#### What to bring with you

Medication

Please bring the medications in their original packs with the pharmacy label on them. This includes tablets, liquids, creams, eye drops, inhalers, patches and any medications you have bought from a pharmacy, supermarket or health food store e.g. herbal and dietary supplements. If you use a tablet organiser/box, please bring in the original packs that contained the medications. If you have a list of your medication from your GP, bring this with you too.

 Please bring any mobility aids/crutches/equipment (e.g. CPAP machines), that you are currently using, as well as reading glasses, hearing aids, and their cases.

#### **Overnight patients**

If you're staying with us overnight or longer, you should also bring:

- Comfortable daywear
- Something suitable to wear to bed, e.g. a comfortable nightie or pyjamas
- Slippers/footwear
- Personal toiletries (shampoo, conditioner and soap will be provided)

#### Please DO NOT

- Bring alcohol, illicit drugs or illegal medication.
- Bring medicinal cannabis, unless it has been prescribed by a doctor, supplied by a pharmacy and is a brand that meets the minimum quality criteria specified by the Ministry of Health. Administration of medicinal cannabis via vaporiser is not permitted on hospital premises.
- · Smoke or drink alcohol 24 hours prior to admission.
- Wear make-up, nail polish, jewellery or body piercings (you can wear your wedding ring).
- Bring any valuables, jewellery, or large amounts of luggage as we do not accept liability for any items brought to hospital.
- Bring a large amount of luggage (please note: if needing to bring more than an overnight bag, please notify us ahead of your stay so arrangements can be made).

#### Your admission to hospital

#### On arrival

When you arrive, please report to reception. We'll check your personal details and your payment or insurance details, after which you'll be collected by the Admissions Unit staff. In the Admissions Unit you will meet one of the nurses who will be caring for you.

#### **Anaesthetic consent**

While you're being admitted, your anaesthetist will visit you to talk about the anaesthetic procedure and get your written consent for anaesthesia (and for blood products if required).

#### **During your stay**

#### Smokefree

Patients and their visitors are advised that Allevia Health premises, including Allevia Hospitals, are completely vape and smokefree.

#### Accommodation

Rooms are allocated as our housekeeping team makes them available, so you and your whānau won't have access to your room until you return from surgery and are ready to receive visitors.

Allevia Hospital Epsom features comfortable single and shared rooms. Single rooms are allocated according to clinical needs, so children and adult patients with complex clinical conditions requiring long-term stay may be prioritised. Patients in shared rooms are charged a reduced rate.

At Allevia Hospital Ascot, you can enjoy the luxury of your own ensuite single room.

It is our mission to make your stay as pleasant as possible. Enjoy delicious meals and keep connected and entertained with free Wi-Fi, radio and Sky TV, as well as direct dial telephone. Please note that some of the amenities may not be available in day stay areas.

#### Meals

Nutritious and delicious meals are important to your recovery and are produced with care every day by our Food Services team.

Room Service enables you to place your meal order directly with the Food Services team between 7am and 7pm. Your meal will be made to order and delivered to your bedside within 45 minutes.

All menus are designed in consultation with our dietetic team but if you have any special dietary requirements, please advise the clinical team during your admission.

#### Phone calls

Staying in touch with loved ones is important for your wellbeing. You can use your mobile phones to make calls in every area of the hospital except for the operating theatre area, the Intensive Care Unit, or any area specifically designated for cardiac services. Friends and whānau are also welcome to call you using our direct dial facility. The usual charges apply for calls made from your room to mobile phones.

#### Allevia Hospital Epsom:

**©** 09 623 6833

Followed by the room's extension number

#### Allevia Hospital Ascot:

**©** 09 520 9505

Then dial extension 699 plus patient room number

#### Free Wi-Fi services

Stay connected with our free Wi-Fi services, which are available throughout the hospital. Passwords are available from the ward reception and Customer Support staff.

#### Your regular medications

On admission a pharmacist may talk you through your regular medications and when you take them. The nurses will then store them away safely for you and bring you each dose as they need to be taken.

We do this because the effects of the anaesthetic and pain relievers can make you drowsy or unwell, so your ability to self-medicate properly is reduced. It's just a little detail to keep you extra safe.

#### Children aged 16 and under

We welcome visits by children prior to their surgery date – this allows them to familiarise themselves with the surroundings, so they're more at ease when they're admitted. Sometimes bringing their favourite toy during this visit can help too.

We are happy to arrange for a parent or caregiver to 'room in' with a child patient. This would be in a recliner chair or similar. Meals are included at no charge for the caregiver.

#### **Visitors**

Contact with friends and whānau can be an important part of your emotional wellbeing as you recuperate.

To find out our current visitor guidelines, please view our 'Patients & Visitors' section on our website **alleviahospitals.co.nz** 

There may be a wait between your arrival and your operation/procedure – this is so our staff can prepare you for surgery, and leaves time for the consultation with your anaesthetist and specialist.

Children are welcome to visit but they must be with adults at all times. We recommend that children under the age of five only visit for a short period of time.

There is a small fee for additional meals if you'd like to have a meal with a friend or whānau member.

#### **Getting ready for your surgery**

Your nurse will carefully explain and carry out any pre-surgery preparations. If you have any questions or concerns, please raise these with your nurse, who will do everything they can to put you at ease.

#### After your surgery

After surgery, we'll transfer you to one of our surgical wards. Here you'll be looked after by a team of registered nurses who are highly skilled in the type of aftercare your operation/procedure requires. Together with your specialist and anaesthetist, they'll work to make your recovery as smooth as possible.

#### Preparing you for going home

The general information which follows is designed to assist your recovery and to supplement any specific instructions you might receive from your specialist. Please discuss these instructions, and any from your specialist, with your nurse before you leave hospital.

#### Your recovery

Before you are discharged, your specialist and your nurse will talk to you about what to expect over the coming days and weeks as you recover. Arrangements will also be made for any aids, such as crutches.

#### **Medications**

Before you leave the hospital, you will be given a prescription for any additional medications you are required to take. Your nurse or specialist will explain these medications to you and will give you a 'Your guide to medications following surgery' guide to take home with you. You may also need to see our pharmacist to discuss instructions for your medications.

Your nurse will arrange for your prescription to be collected from the pharmacy, if required. Please make sure you have your Prescription Subsidy Card, if appropriate. Let your nurse or specialist know if you already have these medications at home and don't need any additional supply.

Depending on the payment agreement with your insurer, you may need to pay for your medication on discharge.

#### Your regular medications

On discharge, your nurse will return your regular medications to you. Please make sure you don't leave without them.

#### Diet

Your diet can enhance your wellness in many different ways. For this reason, and depending on your operation/procedure, you may need to see a dietitian after your surgery to discuss dietary options that will help you recover.

#### Fitness for work

When you can return to work depends on the type of work that you do and the type of surgery you've had. Ask your specialist before you leave hospital about when you might be fit for work. You will be given a medical certificate, if needed.

#### Discharge summary

When you leave hospital, you will be given a discharge summary. This includes information about your presenting problem, your operation/procedure and any follow-up required. Your GP also receives a copy of the summary. If you need to visit your GP or an after-hours doctor, please remember to take this discharge summary with you. If you need additional information than what is provided in the discharge summary, please contact your specialist rooms.

#### Discharge time

The recommended discharge time is **10am.**Discharge after this time may incur additional charges.
If you have trouble organising for your discharge, please discuss this with your nurse.

#### Travel home

To ensure your safety, there is strictly no driving within 24 hours of having a general anaesthetic. Therefore, you probably won't be permitted to drive after your surgery. Please make sure you have arranged a way to travel home safely.

#### At home

If you have had a general anaesthetic, we strongly advise that someone stays with you overnight.

If this isn't possible, please let your specialist or our Customer Support team know prior to admission.

#### After you get home

Depending on the operation/procedure you had, you may experience certain sensations that include pain, nausea, sore throat, muscle pain or a reduced ability to concentrate. These are often to be expected and usually nothing to worry about.

However, if you experience any serious problems or you become severely unwell following discharge, for example feverish, increasing pain or bleeding:

 Call 111 and take an ambulance to the closest public hospital.

**OR** if the problem seems less serious:

 Call your specialist. If they aren't available, please contact your GP or visit your local Accident & Medical Clinic.

#### Follow-up check

You may be advised to go to your GP for a follow-up check one week after discharge or to visit your specialist's clinic. Your specialist will let you know how to make this appointment. This allows your specialist to check your progress, provide you with any test results and give you the chance to ask any remaining questions.

#### Discharge checklist

Before you leave hospital, it's important that you understand and/or have with you the following items:

O Discharge summary from the hospital

$\bigcirc$	Instructions for going home from your specialist
$\bigcirc$	Any medications or prescriptions to have filled
$\bigcirc$	Your own medications that you brought with you to hospital
C	Personal belongings, e.g. your mobile phone charger, your own pillows and any other items you brought with you, such as letters or reports, X-rays, or your Prescription Subsidy Card

When you're ready, let your nurse or the Charge Nurse know that you are ready to leave.

Any supplies or aids needed for your care

at home

#### Pain management

With regular pain relief, you should be able to rest comfortably and carry out activities like walking, showering and physiotherapy exercises. If you find that the medications prescribed by your specialist aren't enough to manage your pain, please contact your GP or specialist.

#### Rest

Feeling tired, uncomfortable and vulnerable when you first go home after surgery is very normal. Plan to have some rest time in your bed and let friends or whānau know not to disturb you for the first day or so – unless they're helping you with meals and other activities.

#### Looking after your operation site (wound)

All wounds go through several stages of healing, and you will be able to see these changes. It is normal to feel:

- Tingling, numbness and itching sensations
- A firm lump under the scar as new tissue forms (this can take six months or longer to resolve)
- Slight pulling around the stitches or clips as the wound heals

We recommend that you shower rather than bathe, unless your specialist or nurse advises otherwise.

If your wound becomes painful, red or swollen, starts to ooze pus/blood or clear fluid, or you get a fever, consult your GP or specialist straight away in case you have developed a wound infection.

If you have clips, staples or non-dissolving stitches in your wound when you go home, these usually need to be removed by your specialist/GP or as an outpatient 10–14 days after your operation. Dissolvable stitches are used under the skin and these can take some months to dissolve completely.

#### Your bowels

Changes in diet, activity and medications can lead to irregular bowel habits, but this usually goes back to normal with time. Exercise and a well-balanced diet, including plenty of fluid, are beneficial.

#### Sexual relations

If you have been given specific instructions about sexual activity from your specialist, please follow these. Otherwise, there is no set rule about the time at which you can resume your usual sexual activity. If you experience pain or discomfort during sexual activity, we recommend that you wait a little longer. This is natural and will improve as you get stronger and fitter.

#### Activity

If you have been given specific instructions about activity from your specialist or physiotherapist, please follow these closely to help your recovery. Otherwise, simply increase the amount of exercise you do gradually. For example, you might decide to take a short walk two or three times a day and slowly increase the distance over a few weeks.

Many people find it easier to use a dining room chair to sit in rather than getting up from a low chair, especially if you have had abdominal or back surgery.

If a certain movement hurts, avoid it where possible until you get your strength back. Movements that cause discomfort can include bending and stretching, lifting heavy weights (including children), pulling and pushing (like vacuuming or lawn mowing).

#### **Driving**

The time you can safely start driving depends largely on the type of procedure you've had. The main concern is your ability to make an emergency stop. If your wound is not causing you any pain, then you're probably ready to drive.

You should **NOT** drive if you are taking strong pain relief that makes you drowsy or slows reaction times.

Please check with your car insurance company about your vehicle coverage following surgery.

#### Going back to work

It's important to feel well before you return to work or you could be affected by tiredness and reduced concentration. Talk to your specialist or GP if your recovery is taking longer than your specialist thought it would and/or the medical certificate you were given does not seem to be for long enough.

#### Support contact numbers

It's important that you feel informed and safe at all times. If you have any questions when you return home from hospital, please refer to your specialist first. If you are unable to contact your specialist in the first instance, please contact your GP or your local Accident & Medical Clinic.

#### For extra support:

- During the day you are more than welcome to call our general line and ask for the ward and talk to the Charge Nurse:
- © 09 623 5700 (Allevia Hospital Epsom) © 09 520 9500 (Allevia Hospital Ascot)
- After hours, you may contact the duty managers:
   © 027 488 1677 (Allevia Hospital Epsom)
   © 027 441 0919 (Allevia Hospital Ascot)

## Additional information for day only admission

Allevia Hospitals provide short-stay, day admission facilities.

#### Immediately after your procedure

After your return from the recovery room, you will stay for a minimum of one hour in one of our short-stay rooms. This time may vary depending on your operation and your recovery requirements.

#### Going home

If your procedure is carried out under local anaesthetic, you will normally be able to leave the hospital shortly after your return from theatre. Prior to discharge, we will provide you with some light refreshments.

Someone will need to pick you up and someone should be at home with you for at least 24 hours after your procedure.

#### Your account

You will usually receive separate accounts from your specialist, your anaesthetist and Allevia Hospitals.

Allevia Hospitals charge include accommodation, operating room fees, anaesthetic supplies, medication and medical supplies.

There may also be additional charges for X-rays, physiotherapy or laboratory services.

Personal expenses such as visitor meals will be charged to your account.

Your invoice will be emailed to you after discharge. All collection or legal costs incurred in recovering any debt will be charged to you.

#### Patients with insurance

If you had prior approval from your insurer, once you have received all the invoices relating to your surgery, you must complete a claim form and forward this with all your invoices to your health insurer.

After the hospital has received payment from your insurance company, Allevia Hospitals will then forward you a statement showing any amount outstanding that has not been covered by your insurer and/or your shortfall payment made prior to admission.

If you didn't have prior approval from your insurer, you will have paid the total estimated hospital costs on or prior to admission.

You will be invoiced for any additional costs approximately five working days after discharge, or notified of any refund.

#### Overseas patients

Overseas patients must contact our Customer Support team prior to admission to obtain an estimate of hospital costs. You are then required to pay the total estimated cost on admission. You will be invoiced for any additional costs approximately five working days after discharge, or notified of any refund.

#### **ACC** patients

Your hospital accounts will be paid directly by ACC. You are required to pay any personal expenses incurred – such as visitors' meals – after discharge.

You will also need to pay for any take-home medication when you're discharged.

#### **Payment options**

If you'd like to pay your account with us by internet banking, please contact our Customer Support team:

#### Allevia Hospital Epsom:

♦ 09 623 6588☑ csepsom@allevia.co.nz

#### **Allevia Hospital Ascot:**

**©** 09 520 9575

□ csascot@allevia.co.nz

If internet banking is done within three days prior to admission, you will be asked to provide proof of the transaction.

Allevia Hospitals also accept most credit cards, EFTPOS and cash (please check your daily card limits). All cash payments over \$10,000 must be accompanied by a government issued ID, e.g. driver licence or passport.

#### Allevia Hospitals services and facilities

There is a wide range of services and facilities available within the Allevia Hospitals buildings to assist you during your stay.

#### **Pharmacy Services**

Pharmacy is available for all your prescription needs and also offers a small range of retail items.

#### **Allevia Pharmacy:**

#### **Ascot Pharmacy:**

Every day including public holidays: 8:30am-10:30pm & 09 520 9579

#### Café

Allevia Café is conveniently located beside our Pharmacy at Allevia Hospital Epsom and Resus Café is situated on level 2 of Allevia Hospital Ascot. Both cafés offer a range of hot food, sandwiches, cakes and drinks. Free Wi-Fi is also available.

For Monday to Friday café hours, please check the website. Cafés are closed Saturday, Sunday and public holidays.

#### Radiology

Allevia Radiology at Allevia Hospital Epsom and Astra Radiology at Allevia Hospital Ascot provide extensive services for inpatients. These charges are in addition to hospital costs.

#### Physiotherapy

Physiotherapy services are available and may be requested by your specialist to assist in your recovery. There is a separate charge for this service.

#### Other services

The following services are available at Allevia Hospitals if you need to access them:

- · Laboratory services.
- Interpreter services are available if required and need to be arranged through your specialist's rooms prior to admission. There is a charge for this service.
- Pastoral Care services.
- Dietitian services. There is a charge for this service.

#### Your rights and responsibilities

Allevia Hospitals are committed to meeting and exceeding the standards expressed in the Health & Disability Act and Code.

We encourage you to:

- Be actively involved in decisions about your care.
- Respect the rights of other patients.
- · Comply with our no smoking policy.

#### Health information privacy

Allevia Hospitals complies with the Health Information Privacy Code 2020. The code recognises that people expect their health information:

- To be kept confidential, because it was probably collected in a situation of confidence and trust.
- To be treated as sensitive, because it may include details about body, lifestyle, emotions and behaviour.
- May have ongoing use if it becomes clinically relevant even a long time after it was initially collected.
- Will be used for the purposes for which it was originally collected and they will be told about those purposes.

To ensure we can provide services of an acceptable standard to you and continuity of care for you, we may collect relevant information from and/or share relevant information with other medical practitioners or healthcare service providers involved in your care. This may include your treating specialists, laboratories, diagnostic service providers, other treating health services and hospitals and your nominated General Practitioner (GP).

We may access and use your information before your care is delivered to ensure continuity of care and that we enhance your pathway of care whilst you are with us.

We may use the information we collect and/or hold about you to undertake retrospective reviews of care delivered to you while you were under our care and undertake various audits of the quality of care to ensure our patients are getting the best care at Allevia Hospitals.

If you do not want your health information used or shared for any of the purposes described, please inform the pre-admission nurse.

To find out how to access and correct patient data, please visit our website.

#### **Patient satisfaction**

We aim to provide excellent service and care and value feedback from patients.

During your stay please pass on any compliments, comments or suggestions to improve the service and care you receive to your charge nurse or the duty manager after hours. They will listen to and address any concerns. Receiving information from patients can alert the team to problems that may not previously have been identified.

Following your stay we will invite you to complete a Patient Satisfaction Survey which will be sent to you after you have been discharged. We would appreciate you completing the survey and returning it to us so we can understand and measure the service we provide.

If you would like to escalate any compliments, comments, or suggestions, or you wish to inform us of a concern in writing, please address your feedback via letter or email to our CEO, Dr Ian England, who will:

- Congratulate any staff member or team for providing outstanding service, or
- · Discuss a problem with you confidentially, or
- Give you more information about your rights as a patient, or
- Fully investigate your complaint and provide you with a written response outlining the findings and improvements.

Please post your letter to Allevia Hospitals, Private Bag 28905, Remuera, Auckland 1541 or email **CEOfeedback@allevia.co.nz** 

#### **Advocacy**

Access to the Health and Disability Consumer Advocacy Service, a free and confidential service, is available by calling 0800 555 050, faxing 0800 2787 7678 or emailing advocacy@advocacy.org.nz

## **Hospital information**

#### **Allevia Hospital Epsom**

#### Where to find us

Allevia Hospital Epsom is located at 98 Mountain Road, Epsom. The hospital is about six kilometres from Auckland city centre. If arriving by car, please enter via the gate signposted 'Gate 1, Main Hospital Entrance' on Mountain Road (near to Almorah Road).

The main entrance has direct access to the car parking building. Please drive up the ramp to the first floor, where you will find the dedicated patient drop-off area and car parks.

#### Arriving on day of admission

- Coming from the first floor of the car park:
   Follow signage through the car park to the overbridge which leads to the reception.
- Coming on foot or from the bottom level of the car park: Follow the green pedestrian pathways that give clear routes to and from reception.

#### Parking and mobility access

All Allevia Hospital Epsom parking areas operate on a 'pay by plate' basis. On arrival please enter your vehicle's licence plate into one of our payment terminals or through mobile parking app – Parkiwi. The first 30 minutes are free and apply only once plate details have been entered into a payment terminal. Parking time limits are in effect and parks are marked (P90, P180 and All Day Parking).

Mobility parking at Allevia Hospital Epsom is available on level 1 of the parking building in the drop-off area. Proceed up the car park ramp and turn left. For patients of the medical specialist centre, there are mobility car parks located on the ground floor outside the centre. As you enter Allevia Hospital Epsom parking from Mountain Road, drive to the left and follow the sign saying 'Specialist Centre Parking'.

Standard parking charges apply to mobility parking bays, and you must display your mobility parking permit at all times.

Visitors can follow signage through the car park to the overbridge which leads to the new reception. There are also green pedestrian pathways that give clear routes to and from reception on foot.

#### Wheelchair access to the building

- From parking on level 1: From level 1, you can access the main reception on level 1 by a ramp located next to the parking machine.
- From parking on Ground level: Follow the green pathway from the car parking machine towards the building for lift access to the main reception on level 1.

#### **Allevia Hospital Ascot**

#### Where to find us

Allevia Hospital Ascot is located at 90 Green Lane East, Remuera, just off the Greenlane motorway interchange in Auckland. There is a patient pick-up and drop-off zone outside the main entrance to the hospital.

#### Arriving on day of admission

#### Main entrance

For those entering Allevia Hospital Ascot after parking in the main entrance car park (drop-off and short-term parking) closest to Green Lane East:

 When first entering Allevia Hospital Ascot, our Admissions Unit is through the double doors on the right-hand wall.

#### **Back entrance**

For those entering Allevia Hospital Ascot after parking in the back entrance car park (long-term parking) closest to Ellerslie Racecourse:

- After parking, turn to face Allevia Hospital Ascot with your back to the large car park. Allevia Hospital Ascot's back entrance is located across the road, and to the far right-hand side.
- After walking up the ramp, you will see Awanui Labs and then Resus Café on your left. You are entering the building on level 2. After entering the building, turn left after the second set of clear, automated doors and locate the lifts and stairwell. Travel down to level 1. When exiting the lifts or stairwell on level 1, you will find our Admissions Unit through the double doors on the left-hand side of the foyer.

#### Parking and mobility access

Free 90-minute parking is available at the front of the building. There is also a large car park at the rear of the hospital operating on a 'pay by plate' basis. On arrival, please enter your vehicle's licence plate into one of our payment terminals. The first 30 minutes are free and apply only once plate details have been entered into a payment terminal or through the mobile parking app ParKiwi.

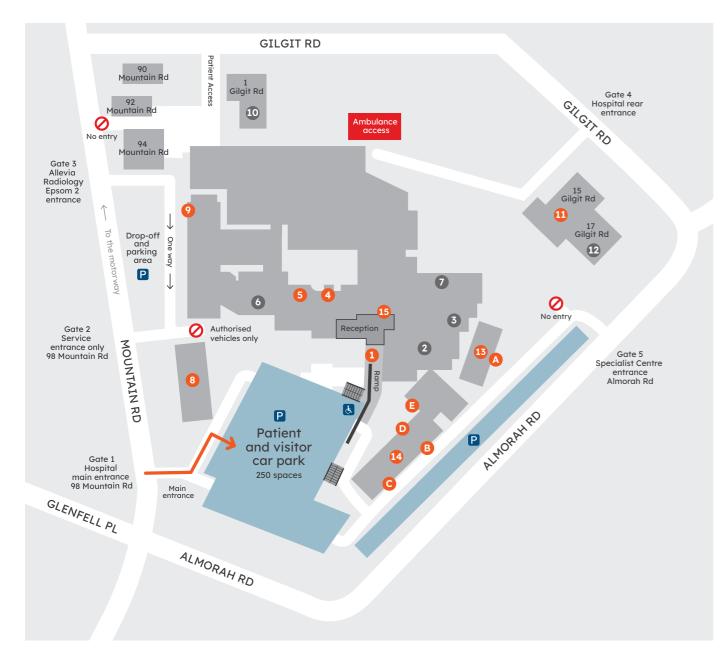
Mobility parking at Allevia Hospital Ascot is available at the front of the main entrance. Standard parking charges apply to mobility parking bays, and you must display your mobility parking permit at all times.

#### Wheelchair access to the building

- From the main entrance car park:
   You can access the hospital via the front entrance
   on level 1, where you will find the Admissions Unit
   through the double doors at the right-hand side of
   the fover and lifts to access other floors.
- From the back entrance car park:
   You can access level 2 via the ramp access at the
   back entrance of the hospital. Lifts are available on
   level 2 to access other floors. Our Admissions Unit is
   located on level 1 on the left-hand side of the foyer.

## **Allevia Hospital Epsom**

98 Mountain Road, Epsom, Auckland



- 1 Ramp access to Allevia Hospital Epsom and Allevia Radiology Epsom 1 reception
- 2 Canopy Cancer Care
- 3 ARO (Auckland Radiation Oncology)
- 4 Allevia Café and outdoor dining courtyard
- 5 Allevia Pharmacy
- 6 Intra
- 7 Awanui Labs (blood tests)
- 8 Gonzaga Hall

- 9 Allevia Radiology Epsom 2 (CT, ultrasound)
- The Heart Group
- 11 Allevia Breast Institute
- 12 Auckland Colorectal Centre
- 13 Allevia Radiology Epsom PET-CT Canopy Cancer Care
- 14 Allevia Specialist Centre
- Allevia Radiology Epsom 1 (MRI/X-ray)
  - BGDE Allevia Specialist Centre entrances

- Allevia Health facilities
- Other on-site facilities
- → Main entrance to patient and visitor car park - 250 spaces
- Walkway to main reception
   Pedestrian access

#### Pedestrian access to main reception from car park

## **Allevia Hospital Ascot**

90 Green Lane East, Remuera, Auckland



- 1 Allevia Hospital Ascot main entrance
- 2 Ascot Pharmacy
- 3 White Cross Urgent Care
- 4 Allevia Hospital Ascot back entrance
  Opens between 6am-5pm. Please use the
  main entrance outside of these times
- 5 Awanui Labs (blood tests)
- 6 Resus Café
- 7 Admissions Unit

→ Main entrance

- Walkway to
back entrance
Pedestrian access
to back entrance
from back
entrance car park
(long-term parking)

<b>Allevia</b> Hospitals			

Our people come from a variety of cultural and personal backgrounds, so we understand that individual patients require individualised care.



While you are in our care, our people will always:

Listen to understand you

Uplift all of you
– mind, body,
and spirit

Walk beside you and your whānau/ support carer Do what is right for you, just as a family member would

We call this **Ngā Rākau Turuturu** 

The nature of our care



#### Allevia Hospital Epsom

98 Mountain Road, Epsom, Auckland 1023

General 09 623 5700
Customer Support (estimates) 09 623 6588
Allevia Pharmacy 09 623 5703
Direct dial to patient rooms 09 623 6833
Followed by the roo

Followed by the room's extension number

#### **Allevia Hospital Ascot**

9 90 Green Lane East, Remuera, Auckland 1051

General 09 520 9500
Customer Support (estimates) 09 520 9575
Ascot Pharmacy 09 520 9579
Direct dial to patient rooms 09 520 9505

Then dial extension 699 plus patient room number

