



Coming into hospital



Highgate
Hospital



Welcome

We are delighted to welcome you as a patient to Highgate Hospital.

We recognise that coming into hospital is, for most people, a daunting experience. But, you can be reassured that we are committed to making sure your stay at Highgate Hospital is as relaxed and comfortable as possible.

This booklet has been designed to provide you with all the practical information you will need concerning your stay with us. For information about the hospital and your rights as a patient, please refer to the 'Patient Guide' which you should have also received. If not, please ask reception for a copy upon arrival.

Before your stay	4
On arrival	5
During your stay	6
Your operation	7
Going home	11

“Our aim is to provide first-class independent healthcare for the local community in a safe, comfortable and welcoming environment; one in which we would be happy to treat our own families.”



Before your stay

Before you come into hospital for treatment, it is vital that you follow any individual instructions given in your confirmation letter. For example, you may be required to refrain from eating and/or drinking prior to your operation and these instructions will all be noted in the letter. Please also observe any directions regarding x-rays, blood tests or other tests before admission.

What to bring with you

There are a number of items you may need to bring with you, even if you are just attending as a day case:

- ✓ Nightwear, dressing gown and slippers.
- ✓ If you are staying for a few days, you may also like to bring casual clothing to wear towards the end of your recuperation or during any post-operative physiotherapy.
- ✓ Personal toiletries (although items such as towels will be provided).
- ✓ Books or magazines to read during your stay.
- ✓ Any medication you are currently taking in the original labelled containers.
- ✓ Any relevant x-rays you may have and your insurance documentation, if applicable.

We strongly recommend that you do not bring any valuables, jewellery, large amounts of cash, credit cards or cheque book. If this is unavoidable there are personal safes in most of the patient bedrooms which you can use. However, please note the Hospital cannot accept any responsibility for valuables kept on the premises.

Medical insurance

If you are paying for your treatment with private medical insurance, it is essential that you have checked the terms and conditions of your policy and obtained authorisation from your insurers prior to admission. Your insurer will issue you with an authorisation number or authorised claim form, which you must bring with you when you come into hospital. In the event that you have treatment and your insurer refuses to pay for the treatment, you will be liable for the charges incurred.

If you have any questions prior to admission, please do not hesitate to contact our Reservations department on **020 8347 3890**.

On arrival

Your time of arrival will have been confirmed in your admission letter. Whilst your time of admission does not always determine the time of your operation, it is important that you arrive on time as your consultant and anaesthetist will want to meet you before your operation.

Patients are usually advised not to drive for a period of time after surgery. So, we would advise you to arrange for a relative or friend to drop you off at the hospital and collect you again on departure. Please also be aware that parking restrictions are in place on the roads surrounding the hospital.

On arrival, please report to reception. We will confirm your admission details but please remind us of any specific dietary or religious requirements.

From there we will show you to your room where you will be familiarised with the facilities in your room and our hotel services, and can settle in and make yourself comfortable. Occasionally, it may be necessary to initially admit you into a preoperative clinic room.



During your stay

Your room

All inpatient rooms are private rooms with an ensuite bathroom and shower. Each room has satellite television and a direct dial telephone for your personal use, as well as comfortable seating for your visitors. Calls will be charged to your account, for payment upon departure. You may, however, use mobile phones in the Hospital unless specifically asked not to by a member of staff. *Please note that facilities may differ in day case rooms, not all of which are ensuite.*

Catering services

Our menus offer a full range of nutritionally balanced meals to aid your recovery. We cater for all dietary requirements including vegetarian, kosher and special diets such as gluten-free. Hot and cold beverages are offered 24 hours a day.

Meals are usually served at the following times:

Breakfast 7.00am - 9.30am Lunch 12.00pm - 2.00pm Dinner 6.00pm - 8.00pm

But, we are always happy to cater for your needs outside these mealtimes. Your visitors are also welcome to join you for meals or drinks in your room, any such items will be charged separately to your account.

Visitors

Friends and relatives are welcome to visit at any time throughout the day. However, we ask that after 9.30pm, all visitors liaise with our nursing staff by phoning **020 8341 4182** prior to visiting.

Smoking

Patients and visitors are not permitted to smoke anywhere within the hospital building or grounds.

Patient services

- ✓ A newspaper of your choice will be delivered to your room daily.
- ✓ Both incoming and outgoing post can be arranged for you as well as typing letters and the receipt or sending of faxes.
- ✓ If you require help in arranging a visit from clergy of any denomination, we will also arrange this.
- ✓ Our in-house Pharmacy can cater for all your medicinal needs and prescriptions.

Your operation

Consenting to surgery

Consultants and nursing staff need your consent before examining or treating you.

Usually you can simply tell them whether you agree with their treatment suggestions but if your treatment involves sedation or a general anaesthetic you will be asked to sign a consent form (you can withdraw your consent if you later change your mind – even after signing).

Consultants and nursing staff must ensure you know enough to enable you to decide about treatment. They will write information on the consent form and discuss the choices of treatment with you. Although they may have recommended a particular option, you are free to choose another. People's attitudes vary on things like the amount of risk or pain they are prepared to accept. That also applies to the amount of information. If you would rather not know about certain aspects, then you should discuss your worries with whoever is treating you.

If there is any procedure you don't want to happen, you must tell the people treating you. The Department of Health provide more information about giving consent on their website at www.dh.gov.uk/consent.

Preparation

Before your operation one of the nurses will check your blood pressure, pulse and temperature. Your consultant and anaesthetist will also visit you to confirm your medical history and answer any remaining pre-operative questions you may have. It is important that you tell them about any illnesses or allergies you may have or have suffered from in the past.

You will need to remove any nail varnish, nail extensions and cosmetics before your operation. Plain wedding bands may be worn but will need to be covered with tape during surgery, other jewellery including body piercings will need to be removed.

A nurse will inform you when you should change into your operating gown and also put an identity bracelet on your wrist ready for surgery. If you have any allergies you will also need an allergy band identifying them. Once ready, you will be accompanied to the theatre by a member of the nursing team, a porter or a member of the theatre staff.

Anaesthesia

If your treatment involves general or regional anaesthesia (where more than a small part of your body is being anaesthetised), you will have been given general information about it in advance and had the opportunity to talk with the anaesthetist.

The word 'anaesthesia' comes from a Greek word meaning absence or loss of sensation. Anaesthesia is one of the most significant developments of modern medicine because it allows once unbearable medical procedures to be performed while you are relaxed and asleep.

There are three main types of anaesthesia:

- ✓ local anaesthetic - numbing a small part of the body
- ✓ regional anaesthetic (including spinal and epidural anaesthesia) - numbing an area of the body
- ✓ general anaesthetic - putting someone to sleep and keeping them asleep for surgery or other medical procedures.

Often, a combination of these is used in order to minimise the doses of drugs needed to ensure successful anaesthesia and a quick recovery.

Local anaesthesia

For operations on a small area of the body it is possible to simply inject local anaesthetic at the site of the operation. This technique is often performed by the consultant or GP in minor surgery units and is usually only used for short, simple operations such as stitching a wound or removing a mole.

Regional anaesthesia

A general anaesthetic is not always necessary or advisable. Depending on the type of operation, the anaesthetist can use techniques to completely numb specific parts of the body. A small amount of an anaesthetic drug is injected near to the nerves that supply a part of the body, temporarily preventing the nerves from sending any messages to the brain to register the pain, so that part of the body becomes completely insensitive to pain.

Spinal anaesthesia is one of the most common types of regional anaesthesia, used for operations below the waist or in the pelvic region. It involves an injection of anaesthetic into the fluid that surrounds the nerves in the lower part of the spine, numbing you completely from the waist down for a few hours.

An epidural uses a similar technique to spinal anaesthesia but a narrow plastic cannula is left in position near to the nerves in the back. This means that the anaesthetist can give repeated doses of local anaesthetics (and painkillers) without further injections, which is useful for longer operations. By being able to increase the dose as needed, the anaesthetist can give a lower overall dose, so that pain is controlled without complete loss of sensation. The cannula can be left in place for several days which can be useful for providing post-operative pain relief.

General anaesthesia

The development of new, safer anaesthetic drugs and sophisticated monitoring equipment means that modern anaesthesia is very safe. Several million general anaesthetics are successfully performed each year in the UK.

Anaesthesia usually begins when the anaesthetist injects a drug through a fine plastic tube (cannula) inserted into a vein usually placed in the back of the hand. Within a few seconds, this sends you quickly and smoothly to sleep. It is also possible to induce anaesthesia with anaesthetic gases, breathed through a mask.

To maintain this unconsciousness, the anaesthetist gives a mixture of oxygen and anaesthetic gases to breathe. This makes sure you are unconscious throughout the operation and will not feel any pain or remember anything about it. The anaesthetist will monitor your condition throughout the operation. For example, the rate and electrical activity of your heart, blood pressure and the amount of oxygen in the blood are measured continuously.

It is sometimes necessary for muscle-relaxing drugs to be given as well. This is often to enable the consultant to perform the operation by relaxing the body's natural muscle tone, which is present even when asleep. When a muscle relaxant is used, the muscles responsible for breathing are effectively paralysed and the anaesthetist has to control the patient's breathing. To do this, a plastic tube is inserted into the windpipe (trachea) and a machine called a ventilator inflates and deflates the lungs in an accurate and controlled rhythm. The anaesthetist will also use strong painkilling drugs mixed with an anti-emetic (an anti sickness drug) to control pain and nausea during and after surgery.

Samples

Some operations involve removing a part of the body (such as a gall bladder or a tooth). Other operations may require samples to be taken as part of your care. These samples may be of blood or small sections of tissue, for example of an unexplained lump. Samples may also be checked further by other healthcare professionals to ensure the most accurate results.

You should always be told in advance if samples are likely to be taken. If samples are to be stored or retained you will be told in advance and your permission will be obtained. In the interests of safety, no tissue, specimens or implants removed during an operative procedure at Highgate Hospital can be returned to patients.

Photographs and videos

As part of your treatment some kind of photographic record may be made – for example x-rays, clinical photographs or sometimes a video. You will always be told if this is going to happen. The photograph or recording will be kept with your notes and will be held in confidence as part of your medical record. We will not use your photographs or videos in a way that might allow you to be identified or recognised without your express permission.

Back in your room

When the anaesthetic gases are stopped, you begin to recover quite quickly. A drug is given to reverse the effects of any muscle relaxant used and you will be breathing normally soon after the operation is over. You will wake up in the recovery area and will be looked after by a recovery nurse before returning to your own room. Serious complications following an operation and anaesthetic are very rare; most people experience few or no side-effects at all. In fact, many operations are now planned as day cases, without having to stay in overnight.

It is common to feel drowsy afterwards but this usually wears off quickly. When you are fully awake (and depending on the type of surgery) you may be able to have a drink and perhaps something to eat. The nurse will continue to monitor your pulse and blood pressure regularly as appropriate.

Some people, however, may experience some discomfort after an operation, but this can be relieved with painkilling drugs as injections or tablets. Nausea after an operation is less common than it used to be as a result of modern anaesthetic drugs. Anti-sickness medicine may also be given if the operation itself or the painkillers used, are known to be common causes of nausea.

Amongst the 25,000 operations taking place every day in the United Kingdom, sometimes things do not go as they should. Although the doctor involved should inform you and your family, often the patient is the first to notice something amiss. If you are worried, for example about the after-effects of an operation continuing much longer than you were told to expect, please speak to a member of the nursing staff who will be able to assist you.

Going home

You will be advised by your consultant or your nurse how long you will need to stay in hospital for. Discharge time is 9am on the day of your departure. Please be advised that you should not drive your car for at least 24 hours after surgery. We strongly recommend that you ask a friend or relative to collect you. Alternatively, we can arrange a taxi or private ambulance for you.

If you need to take any medication following your departure, this will be given to you when you leave. Please ask for any X-rays or other imaging taken during your stay and bring these with you for any further outpatient consultations.

Follow-up care

If you need to see your consultant again following your discharge, an outpatient appointment will be made before you leave or you will be notified of your appointment as soon as possible after your discharge. Following your discharge, if you have any concerns or questions or are in need of advice, please telephone the hospital and speak to the senior nurse on duty.

Paying for your treatment

If you are paying for your treatment with medical insurance, we can often arrange direct payment. If you are paying for your own treatment you will have been asked to pay your hospital bill prior to or on admission.

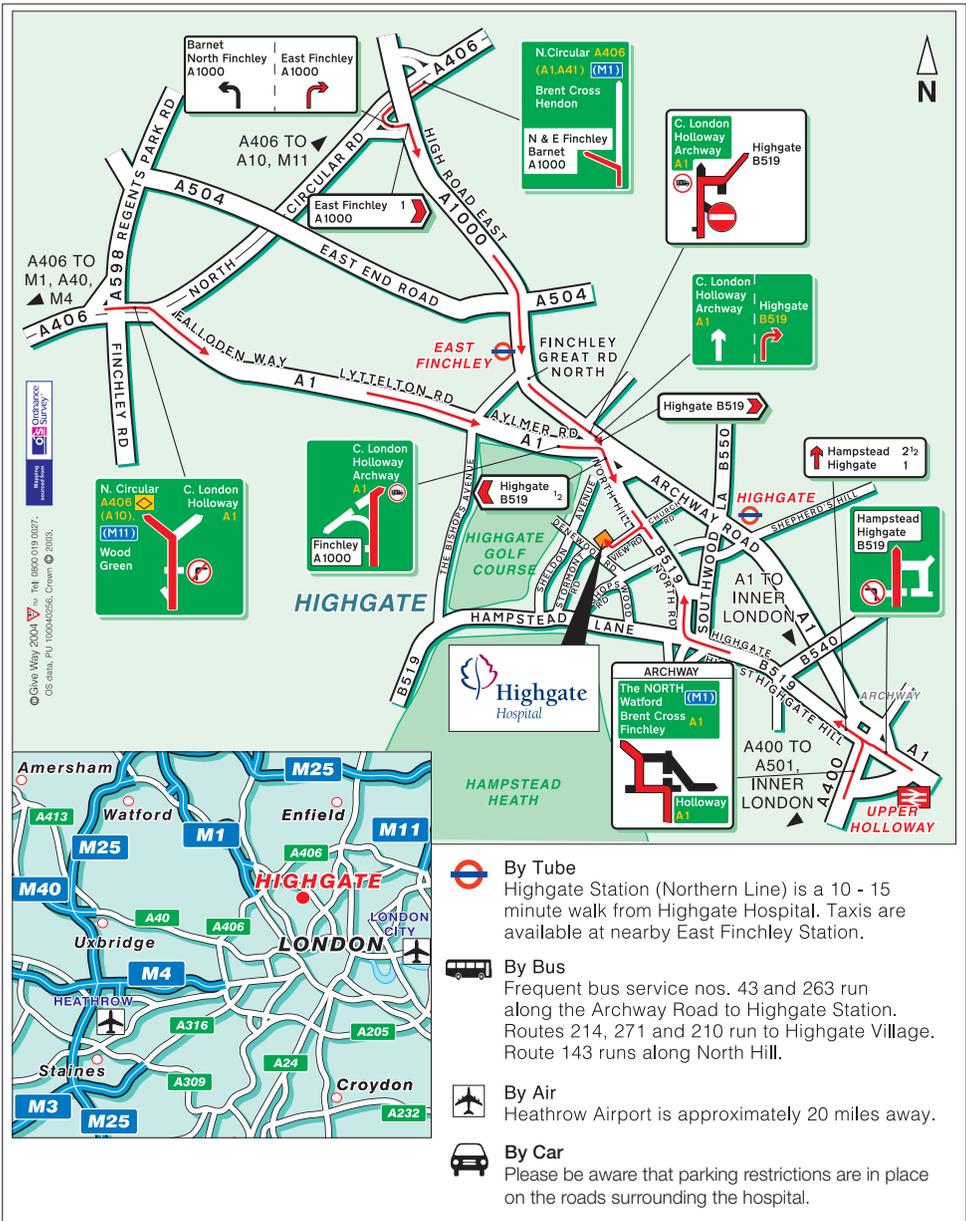
However, any personal items, eg telephone calls, visitors' meals, take home drugs or physiotherapy aids are charged separately, and are not covered by insurance companies. So, you will need to pay for these items before leaving the hospital.

Your feedback

We always welcome feedback from patients, positive or negative, as this helps us maintain and improve our high standards of care. After your treatment or stay you may be given a short, confidential patient questionnaire to complete. The results of these help us adjust our working procedures and improve for the future.

We also have comments and suggestion boxes available in our waiting areas, which are reviewed on a monthly basis.

If you have any further questions prior to coming into hospital, please contact us on **020 8341 4182**.



Part of Aspen Healthcare Ltd
 Registered office: Centurion House,
 37 Jewry Street, London EC3N 3ER
 Registered in England No: 2140182
 VAT Registration No: GB 744 0284 46

Highgate Hospital, 17-19 View Road, Highgate, London N6 4DJ Tel: 020 8341 4182
www.highgatehospital.co.uk