

Logan Endoscopy Day Surgery Centre

1 WELCOME

Welcome and thank you for choosing the Logan Endoscopy Day Surgery Centre (LEDSC) for your upcoming procedure. The doctors and staff of the LEDSC are committed to providing the best standard of care for all of our patients undergoing endoscopy procedures.

This booklet will help assist you in preparing for your admission. Please read it carefully as it includes essential information regarding your treatment and includes helpful advice and answers to questions you may have. If you still have any questions, please contact us. Our every effort is to make your stay a comfortable and stress-free experience.

2 CONSULTATION

You will have the initial and subsequent appointments with your specialist. If your specialist recommends an endoscopy, this will be discussed with you during your consultation. The consultation fee your specialists will charge you is for that appointment, which you may claim some back from Medicare. If an endoscopy is recommended to you, your specialist will give you an estimate of fees for their services. This fee does not include any hospital fees or anaesthetist charges.

Endoscopy: An **endoscopy** involves examining the inside of a person's body using an endoscope. An endoscope is a medical device consisting of a long, thin, flexible (or rigid) tube which has a light and a video camera. There are two types of endoscopy; gastroscopy and colonoscopy.

Gastroscopy: The procedure called **gastroscopy** involves the placing of an endoscope (a small flexible tube with a camera and light) into the stomach and duodenum to search for abnormalities.

Colonoscopy: A **colonoscopy** is a procedure that enables an examiner (usually a gastroenterologist) to evaluate the inside of the colon (large intestine or large bowel).

3 TRANSLATING AND INTERPRETING SERVICES

LEDSC utilizes 'Translating and Interpreting Services' to assist in the translation of medical information with non-English speaking clients. This service requires pre-booking and requirement will be assessed at the time of your consultation.

Unfortunately a relative is not able to translate medical information.

4 FEES & CHARGES

For an admission, there will be a number of fees to consider. The hospital admission fee will depend on whether you have private health insurance, current DVA assistance, work cover or are self-funded. All doctors and pathology fees are 'no gap' so you will not have to pay for these unless you do not have Medicare or is an overseas visitor.

You will be asked to sign a financial consent form. This form contains the facility fee and list of consumables that you may be charged after your procedure. We will charge you for these items when we know what, if any, has been used during your procedure. As a guide, the consumables charges are:

Injector / Dilatation	\$ 100
Clip Devices (per clip- used to control bleeding)	\$ 150
Spot Injector (to mark or tattoo the site)	\$ 180

4.1 INSURED PATIENTS/PRIVATE HEALTH INSURANCE

LEDSC has agreements with the major private health funds to cover the hospital charges for your admission. Depending on your level of cover, some policies require you to pay an excess or co-payment, and you will be asked to pay for this on your admission.

We therefore strongly recommend that you contact your health fund to confirm your cover prior to your admission. LEDSC will submit the hospital claim directly to your private health insurer.

4.2 DVA PATIENTS

Logan Endoscopy Day Surgery Centre will lodge a claim to the Department of Veteran Affairs on your behalf.

4.3 WORK COVER

At your initial consultation, please provide us with your work cover claim number. We will contact Work Cover Queensland on your behalf and obtain an approval letter prior to your admission.

4.4 SELF-FUNDED PATIENTS:

If you are a self-funded patient, you may be required to pay an estimation of costs of the hospital fee on your admission. This fee does not include the use of prostheses/chargeable items, such as snare, clips, spot-injectors etc. This will not be known until after your procedure has been conducted. You will be asked to pay for these items used.

5 ABOUT MY PROCEDURE

Depending on your procedure, you will be at the hospital for around 2-3 hours. The length and time depends on other factors, such as how well you wake from sedation, delayed or lengthy procedures or unexpected complications. We strive for excellent, safe patient care and this sometimes means there may be unavoidable delays.

5.1 IMPORTANT SCREENING INFORMATION

If you meet the following criteria, please phone the hospital and speak to the nurse before your procedure:

1. Under 18 years of age
2. Weigh more than 150kg
3. Have an allergic reaction to Latex
4. Have a bleeding disorder
5. Do not speak English

5.2 WHAT DO I WEAR?

We recommend that you wear something comfortable and non-constricting. You may wish to bring a cardigan with you, the air conditioning is quite cool.

5.3 BEFORE YOUR ADMISSION

Prior to admission, you will receive some paperwork regarding your procedure. Please complete this and return it to us.

5.4 PRE-OP PHONE CALL

You may be telephoned prior to your procedure by a nurse, an administration officer or both to clarify some information. A nurse may ring you to discuss some of the medical information you have detailed on your paperwork, such as information regarding your medication, allergies, etc.

An administration officer may ring you to discuss payment arrangements, an excess or co-payment that is required by your health fund or to discuss full fees for uninsured patients.

5.5 FASTING

Your specialist or nurse/ receptionist will advise fasting times. Please follow the instructions provided by them.

5.6 PRE-PROCEDURE PREPARATION

If you are having a colonoscopy, you will be required to have a pre-procedure drink or preparation prior to your procedure. It is important to ensure that you follow the directions and finish the preparation. Your bowel motion should be clear (appear like urine) by the time you come to the hospital.

5.7 MEDICATION

Your specialist will advise what medication you need to cease or reduce, and when do to this. Please follow the instructions provided by the specialist.

5.8 VALUABLES

Leave any valuables at home or give them to your carer before they leave. We do not have facilities to store valuables. Valuables include: rings, earrings, necklaces, bracelets, brooches, excess cash or other items of value. If you choose to bring any valuables with you, you do so at your own risk.

6 WHEN NOT TO COME TO HAVE YOUR PROCEDURE

There are times when we do not want you to come to the hospital for your procedure. If you have any of the following, please consult your doctor or postpone your procedure:

- Conjunctivitis in either eye
- Cold or Flu
- Commenced any new medication (especially blood thinning medication)
- Vomiting and diarrhoea that is not caused by bowel preparation
- Chicken Pox or any other illness that requires isolation.
- COVID 19

7 ON THE DAY OF ADMISSION:

7.1 MEDICATION TO TAKE BEFORE THE PROCEDURE

Make sure you take your normal dose of medication prior to your procedure with a small sip of water.

For patients taking **anti-hypertensives**, you must take your regular medication on the day of your procedure. Only take this medication with a small sip of water.

Diabetics: On the morning of your procedure please check your blood sugar level. If you are **insulin dependent** diabetic, ring us if you are unsure what to do. If the sugars are above 10, take ½ of your regular dose or follow the instruction given to you by your specialist. If you take **tablets** to control your diabetes, do not take them before your procedure. Follow the instructions given by your specialist.

7.2 HAVING A CARER TO LOOK AFTER YOU

It is our policy that all patients have a carer to take them home and look after them for the next 24 hours. If you do not have a carer, we will not be able to perform your procedure at our facility. You may consider having your procedure done at an overnight facility so that you can be cared for overnight.

7.3 ADMISSION

On the day of your procedure, your first stop will be at reception where our administrative staff will explain the paperwork you are required to complete or check. This includes:

- Confirming your personal information (name, date of birth, etc);
- Signing the Informed Financial Consent Form;
- Providing us with your emergency contacts; and
- Confirming your health information (Medicare card, Health Fund details, Concession Cards, DVA etc).

After the paperwork has been completed, one of our nurses will carry out some pre-procedure medical checks with you. Part of this procedure will include having some baseline observations taken (temperature, blood pressure, heart rate, etc).

7.4 THE PROCEDURE

After the nurse has seen you, you will be shown where the bathroom is if you need to go, and where to wait for your consultation with the anaesthetist. The anaesthetist will meet you, and will explain the type of anaesthetic used, and the risks involved. At this point, you should tell your anaesthetist if you have had any adverse reactions to anaesthetics in the past. When it is your turn, you will be taken into the procedure room. You will see your specialist one last time and your procedure will be conducted.

7.5 RECOVERY

After your procedure, you will be taken in to a recovery area. When you are awake and alert, the nurse will take you to a recovery area and refreshments will be provided.

7.6 DISCHARGE

The nurse will review you before you leave the facility. If there are any prescriptions, or follow-up information for you, the nurse/Doctor will give it to you then. When you are ready to go home, the nurse will remove your cannula, and contact your nominated carer to advise your discharge time. It is essential to have a responsible person to take you from the hospital.

If you have concerns, or you have followed the advice given to you by the nurse and you are still concerned, contact your doctor's rooms. Make sure you take the required pain relief and/or antibiotics as prescribed to you. Some patients will not be prescribed any medication.

8 POST PROCEDURE

The benefits of modern surgical methods are that recovery is quick, and you may resume near-normal activities almost immediately. The only restrictions that you must observe are:

- In the first 24 hours
 - Do not drive or operate heavy machinery
 - Do not make important decisions or sign legal documents
 - Do not drink alcohol

After care & follow-up

Your doctor may have already requested a follow-up appointment. Please make and attend this appointment to obtain results from any tests conducted, or findings from your procedure.

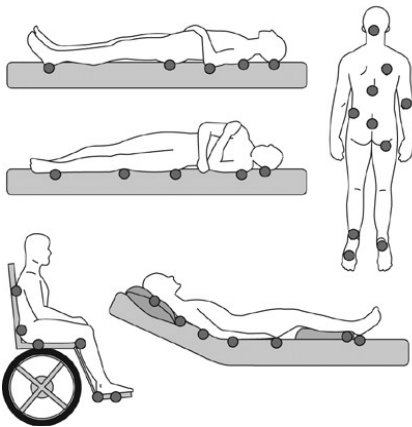
9 HELPFUL INFORMATION

Sometime it is difficult to take in all the information about your procedure, so below is some helpful information that will help with your recovery: Pressure Area Care, Medication Safety, Falls Assessment, Advanced Health Directives, Infection Control and Community Resources available for you to access.

9.1 PRESSURE AREA CARE:

Even though your time with us is limited and your procedure will be short in duration, we would like to educate you about pressure injuries and how they can occur. We will assess your skin and, if necessary, provide you with relevant positioning aids to prevent these from occurring whilst in our care.

Pressure injuries are caused by unrelieved pressure that damages the skin and underlying tissue. They usually occur over a bony prominence as a result of pressure, shear, friction, or a combination of these factors. Below are some illustrations of common areas where pressure injuries can occur.



If you are unable to move freely, have loss of bowel or bladder control, poor nutrition and lowered mental awareness, these increase your chance of getting pressure ulcers.

You can prevent pressure ulcers by keeping your skin clean, preventing dry skin, protecting your skin from injury by changing your position regularly, using pillows or wedge supports, eating well and being active.

9.2 FALLS ASSESSMENT

Many drugs can affect your balance and judgment. For this reason, we will assess your likelihood of a fall post procedure. This is one reason why we require you to have a carer with you after your procedure.

If you have a history of falls, or you are highlighted as a falls risk, we may conduct a further assessment and keep you a little longer to minimise the risk of a fall after you leave our facility. Please ensure that someone stays with you for 24 hours after your procedure.

There is a vast range of methods for falls prevention on the internet; especially from the Queensland Health website.

9.3 MEDICATION SAFETY

Medication safety is particularly important post procedure. If you are required to take pain medication, make sure someone is able to dispense this to you until the full effects of anesthesia have worn off. This is to ensure you take the right drug and the right dose at the right time.

If you have been given a prescription for a particular medication to take after your procedure, it will be prescribed by the doctor and instructions written in the discharge report. When you pick your medication up from the pharmacy, please ask the pharmacist if there are any specific side effects you need to be aware of, and if the drug is compatible with any medication you are currently taking.

9.4 ADVANCED HEALTH DIRECTIVE

If you have an Advanced Health Directive, please bring a copy of this with you for our records.

An Advanced Health Directive is a legal document that enables you to give instructions about your health care, including special health matters when you are no longer able to make a decision for yourself. In effect, the Advanced Health Directive becomes your decision maker, giving instructions at the time the decisions are required. An Advanced Health Directive allows you to make specific directions about the care you will want and under what circumstances. The directions in an advanced health directive can be very detailed, or they can be broad, outlining your beliefs and values about end of life matters. If you have one of these in place, please bring a copy of this with you.

If you are interested in obtaining an Advanced Health Directive, you can buy this form from a post office or news agency, or you can download and print it from the Department of Justice and Attorney-General website at www.justice.qld.gov.au.

9.5 INFECTION CONTROL

Infection control is the responsibility and first priority of management and all staff within our facility. Therefore, we strictly adhere to Single use policy. This ensures that 'single use' equipment is not reused. Reusable instruments and equipment are cleaned and sterilized according to Australian Standards. Staff health, including immunization is a major priority so that our staff is not a risk to patients and they are protected from contracting infections.

Hand Hygiene is the single most important way to prevent infection. Hands should be cleaned before and after visit with patients or after contact with blood or other potentially infectious material and after removing gloves or other clothing. Hand rubs and toilets are available. Please contact us if you would like more information about infection control issues.

10 DID WE LOOK AFTER YOU?

Logan Endoscopy Day Surgery Centre takes complaints and compliments very seriously. If we do something well, please let us know. You can leave your feedback with the nurses, on one of our patient surveys or write to us.

10.1 WHAT IF I AM NOT HAPPY WITH THE SERVICE?

If you are unhappy with our service we would like to know about it. We take complaints very seriously and we will do our best to resolve the issue with you. You can let our staff know, email us or write to us. The Nurse Manager and/or Senior Management representative are usually onsite to speak with you. Our management team will investigate your complaint and provide you with information about the outcome of the issue. We do have a complaint escalation process and if you feel that it has not been resolved, we will escalate it for you.

Outside of the facilities, the Office of the Ombudsman Health is available for you to contact.

10.2 OHO:

The Office of the Ombudsman Health (OHO) is a body that takes complaints about a wide range of health services provided by registered practitioners (eg doctors, dentists, pharmacists, nurses, physiotherapists), and unregistered practitioners (e.g. naturopaths, hypnotherapists, acupuncturists). You can also complain about private and public hospitals, medical centres and other health service organizations.

The OHO are unable to take complaints about: a compensation or rehabilitation claim, an appeal under the Workplace Health and Safety Act 1995 or services provided by State Emergency Services and volunteers in emergency situations (first aid, life support, etc). For more information, you can visit: <http://www.oho.qld.gov.au/>.

11 COMMUNITY SUPPORT

Australian Diabetes Council: <http://www.australiandiabetescouncil.com/diabetes-education/healthy-eating>

Bladder and bowel website: <http://www.bladderbowel.gov.au/>

Cancer Council Queensland: <http://www.cancerqld.org.au/>

Interpreter Services: <http://www.tisnational.gov.au/>

Medicare Australia: <http://www.humanservices.gov.au/customer/information/welcome-medicare-customers-website>

Life Line (Telephone Counselling): <http://www.lifeline-h2h.org.au/lifelineaustralia.html>

12 .1 CONSUMER FOCUS GROUP

Logan Endoscopy Day Surgery Centre has recently created a Consumer Focus Group. From time to time, we seek feedback from our consumer group about our documentation, forms and information we give to patients. If you or your carer would like to be part of this group, please send us an email: loganendoscopy@hotmail.com

12.2 Demographics

In Logan City, 18.1% of people spoke a language other than English at home in 2021.

Analysis of the language used at home by the population of Logan City in 2021 compared to South East Queensland shows that there was a smaller proportion of people who used English only, and a larger proportion of those using a non-English language (either exclusively, or in addition to English).

Overall, 75.1% of the population used English only, and 18.1% used a non-English language, compared with 79.2% and 15.6% respectively for South East Queensland.

The dominant language used at home, other than English, in Logan City was Samoan, with 1.3% of the population, or 4,557 people using this language at home.

The major difference between the languages used at home for the population of Logan City and South East Queensland in 2021 was:

- A *smaller* percentage using Mandarin at home (1.1% compared to 2.2%)

Between 2016 and 2021, the number of people who used a language other than English at home increased by 14,334 or 29.7%, and the number of people who used English only increased by 23,207 or 9.8%.

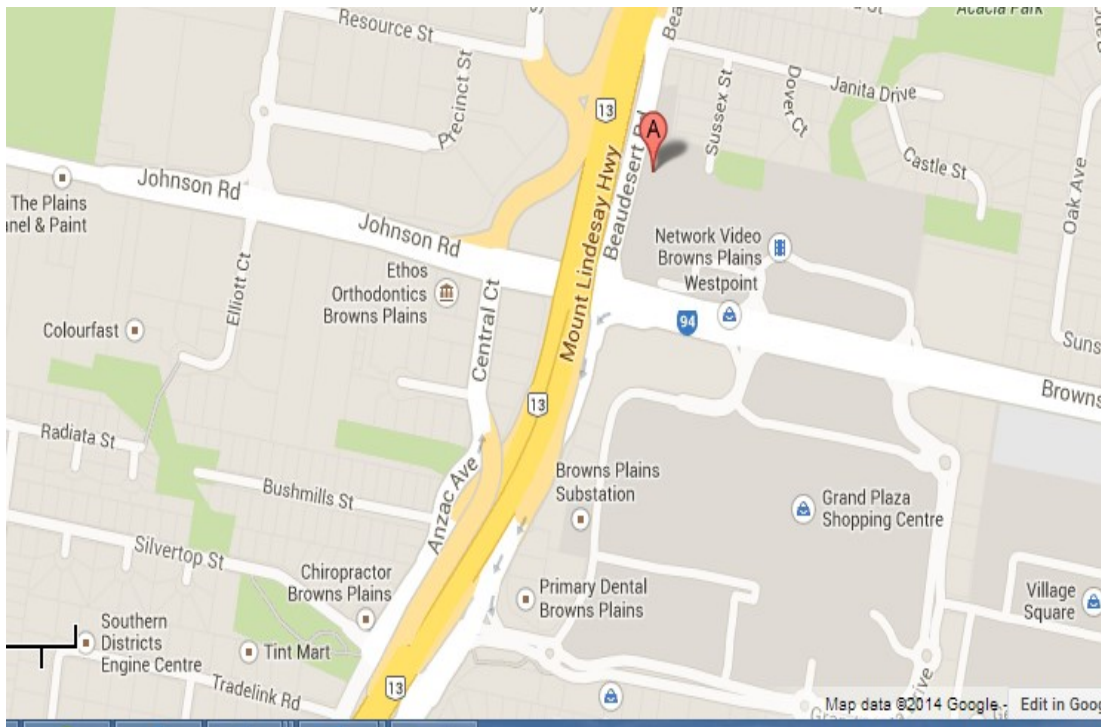
The largest changes in the languages used by the population in Logan City between 2016 and 2021 were for those using:

- Punjabi (+2,680 persons)
- Hazaraghi (+1,197 persons)
- Mandarin (+779 persons)
- Arabic (+755 persons)

13 CONTACT DETAILS & MAP

We are located off the Mt Lindesay Highway. LEDSC is in the Westpac House complex of shops, near Repco and Browns Plains Vet Surgery. If you use your GPS, come via Mt Lindesay Highway instead of Beaudesert Road (Service road).

Unit 3, 3276 Mt Lindesay Highway
Browns Plains QLD 4118
Ph: (07) 38092893
Fax: (07) 38092895



14 REFERENCES

Pan Pacific Clinical Practice Guideline for the Prevention and Management of Pressure Injury
<http://www.ofmq.com/Websites/ofmq/Images/SOS%20PU%20Toolkit/SOSAPatient'sGuide.pdf>
Department of Justice: www.justice.qld.gov.au

Queensland Health: Stay on your feet. Falls Prevention
<http://www.health.qld.gov.au/stayonyourfeet/for-seniors/falls-at-home.asp>