

## Welcome to Unit 7.2: Orthopaedics

Halifax Infirmary, QE II

Our goal is to get you home.

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# Welcome to Unit 7.2 : Orthopaedics

Unit 7.2 is for people who have had:

- › An orthopaedic injury
  - › Orthopaedic surgery
  - You may be treated for a condition that affects your muscles, joints, or bones (like an infection, a sports injury, a broken bone, or a joint problem).
  - Unit 7.2 includes 2 units:
    - › Orthopaedic Intermediate Care Unit (IMCU)
    - › Orthopaedic Unit
  - Each unit offers a different level of care:
    - › In the IMCU, there is 1 nurse for every 2 patients. This is for people who need closer monitoring.
    - › When you do not need close monitoring, you will move from the IMCU to the Orthopaedic Unit.
  - During your stay, your health care team will work with you and your support person(s) to create a care plan.
  - To help us provide the best care possible, it is important for you to talk to us about:
    - › Your care plan
    - › The goals of your stay
    - › What you and/or your support person(s) can do to help you reach your goals
  - We respect and value your privacy. Before taking photos or videos on the unit, talk with a member of your health care team. You are responsible for respecting the privacy and confidentiality of others, including patients, support persons, visitors, and staff. Please ask a member of your health care team for the pamphlet *Your Rights and Responsibilities*, or visit:
    - › [www.nshealth.ca/patient-education-resources/0466](http://www.nshealth.ca/patient-education-resources/0466)
- OR**
- › Scan the QR code below on your smartphone (open the camera, point it at the code, and tap the banner or border that appears):



## Home First and discharge planning

- It is important to start planning for your discharge home as soon as you are admitted to the hospital. Right now, you may not feel ready to go home. Our team will work with you to make sure that you have the support you need to go home.
- We know that for most people, living at home is where they want to be. Home First is about:
  - › creating a discharge plan with the goal of getting you back home.
  - › providing the care you need to keep living at home.
- We know that it can be stressful to find and put in place all of the programs and services you need. **Please ask for a referral to Home First.** We can connect you to programs and services in your area.
- We can help you figure out the best next step for you if you meet 1 of these:
  - › You are facing health changes that affect your ability to meet your needs.**OR**
  - › You are helping a loved one who wishes to return home from the hospital, but needs help to do this.
- We work with you and your loved one(s) to find the best ways to support you at home.

**The following organizations can help you find resources to support your discharge from the hospital or your care at home:**

### Caregivers Nova Scotia

- › <http://caregiversns.org/>
- › Phone (toll-free): 1-877-488-7390
- › Email: [info@CaregiversNS.org](mailto:info@CaregiversNS.org)

### 211

- › [www.ns.211.ca](http://www.ns.211.ca)
- › Phone: 211
- › Email: [help@ns.211.ca](mailto:help@ns.211.ca)
- › Text: 21167
- › Live chat is available online  
Monday to Friday, 9 a.m. to 4 p.m.

## What if I have questions during my hospital stay?

- If you have any questions about your care, please talk to your nurse.
- If you still have concerns after talking to your nurse, please ask to talk to the charge nurse.
  - › The charge nurse can help you talk to the unit manager, administrative coordinator, or patient representative, as needed.

## Visitors

- Visitors are an important part of your healing.
- **Rest is also important.**
  - › If you are not feeling well, we may ask your visitors to keep their visit short.
  - › Visitors may be asked to wait in the solarium/patient lounge (next to the elevators) during certain procedures.
- **Your support person(s) should not visit if they are sick.** Sickness that may feel mild to them (like a cold) could be severe (very bad) for a person in the hospital.
- Visitors should clean their hands both before and after visiting.
- Visitors should clean their hands between visits with people in the same room.
- **Visitors cannot use patient bathrooms.** Visitor bathrooms are located near the entrance of each unit.
- **Visitors cannot sit on a patient's bed.** There are chairs in each room for visitors. Please ask a nurse if you need more chairs.
- **Visitors should follow any special precaution signs that are posted in front of a person's room.** If you have questions, please ask a member of your health care team.
- We ask that visitors avoid calling **when the nurses are changing shifts (6:45 to 7:45 a.m. and 6:45 to 7:45 p.m.).** This helps to protect patient privacy and allows time to focus on handing off care.

## Who is on my health care team?

You will be cared for by a team that includes:

### You and your support person(s)

- It is important that you and your support person(s) take an active role in your care and recovery by:
  - › asking any questions you may have about your care.
  - › being involved in making decisions about your care.
- If you or your support person(s) have questions or concerns, talk with a member of your health care team. They will help set up a meeting with your team.
- **Encourage your support person(s) to help you.**
  - › Mealtimes are busy. Your support person(s) can help you with your meal tray. Your health care team can also help with meals, as needed.
  - › Ask your nurse or physiotherapist if it is OK for your support person(s) to go for a walk with you, or help you with your exercises.

### Doctors

- A team of doctors will oversee your care during your stay. This team includes:
  - › Orthopaedic surgeons
  - › Residents (specialists in training)
  - › Medical students
  - › Clinical associates (licensed medical doctors who provide care within the hospital)
- Your follow-up care will be given by the surgeon who did your surgery. If you would like to talk to your doctors, please ask a member of your health care team.

### Nurses

- Nurses on Unit 7.2 are trained in orthopaedic medicine. They will:
  - › give you medications and treatments.
  - › help with your personal care (like bathing, dressing, going to the bathroom).
  - › teach you and your support person(s) about your care.
  - › watch for changes in your condition.
  - › coordinate your care with other team members.

- This team includes:
  - › Registered Nurses (RNs)
  - › Licensed Practical Nurses (LPNs)
  - › Nursing students (sometimes)

### **Nurse practitioner (NP)**

- NPs are RNs who have more education and nursing experience that allows them to assess and then order the right tests, blood work, and medications that support your care.

### **Charge nurse**

- The charge nurse is responsible for coordinating patient care and movement on the unit. They keep the unit running smoothly.
- They are also a resource and support for staff, patients, and support persons. Talk with the charge nurse if you have any concerns.

### **Unit resource nurse**

- The unit resource nurse supports unit staff in making decisions about your care.

### **Care team assistant (CTA)**

- CTAs help nurses deliver patient care.

### **Occupational therapist (OT) and occupational therapy assistant (OTA)**

- The OT and the OTA check how well you can do personal care (like bathing, dressing, eating, housework). They can suggest equipment to make your return home safer and easier.

### **Physiotherapist (PT) and physiotherapy assistant (PTA)**

- The PT and the PTA will work with you on your range of motion, strength, walking, and transfers (moving from one position or place to another, like from a bed to a chair). This will help you to be as independent as possible when you go home.

- If the PT team says it is safe, your support person(s) can help you with your exercises and with getting out of bed more often.

### **Health services manager**

- The health services manager looks after the administration and leadership of the unit. Your feedback helps us make sure we are meeting your needs.
  - › Hours: 8 a.m. to 4 p.m., Monday to Friday

### **Unit clerk**

- The unit clerk supports the team by doing administrative tasks (like keeping patient charts in order, answering the phone) at the nursing station.

### **Unit aide**

- The unit aide supports the team by stocking and ordering supplies. They help with some patient care needs. For example, they can help during meal times (help with feeding patients, getting water for patients).

### **Dietitian**

- The dietitian helps patients meet their nutritional needs.

### **Continuing care coordinator**

- The continuing care coordinator works with you and your health care team to help you go home safely.
- They will help you find and connect with services you may need after you leave the hospital.
- Please ask a member of your health care team for the pamphlet *Continuing Care: Important Information for You*, or visit:
  - › [www.nshealth.ca/patient-education-resources/2120](http://www.nshealth.ca/patient-education-resources/2120)

**OR**

- › Scan the QR code on your smartphone.





## **Spiritual care**

- Spiritual care counselling offers spiritual and emotional support. Spiritual care is for people of all spiritual beliefs, and for people without a faith community.

## **Social worker**

- A social worker can work with you and your health care team to find resources and services during your hospital stay and after you go home (like housing or transportation, helping you apply for grants and social services, or helping you and your support person(s) cope with the stress and decisions that often come with being sick and in the hospital).

## **When you are ready to move out of the IMCU**

- When you no longer need to be monitored as closely, you will not be connected to a heart monitor. We will continue to check your vital signs (heart rate, temperature, breathing, blood pressure), as needed.
- You will be moved to the next available bed on the Orthopaedic Unit. You will still be followed by your orthopaedic health care team.

## **To contact the Orthopaedic Unit:**

- › Phone: 902-473-2376
- **The nurses change shifts from 6:45 to 7:45 a.m. and from 6:45 to 7:45 p.m. Please ask your support person(s) not to call during this time.** This is when the nurses share information and check on patients. Answering the phone takes them away from this.

## **What should I bring with me?**

- › Comfortable, loose clothing
- › Shoes with non-skid soles
- › Glasses (if needed)
- › Hearing aids and batteries (if needed)
- › Dentures (if needed)
- › Headphones
- › Personal care items (like soap, shampoo, toothbrush, toothpaste, shaving cream)
- › CPAP or BiPAP machine (if you have one)
- › Cell phone and charger
- › Ear plugs (if you are a light sleeper)

## **Will I be in a private or a semi-private room?**

- You will most likely share a room with other people.
- At times, we may need to move people from one room to another to meet their care needs. We try to avoid this as much as possible.
- If you would like to request a private or a semi-private room, ask the unit clerk. **There is a charge for this.**

## **If you have private health insurance:**

- Ask your insurance provider if your plan covers some or all of the cost of a private or a semi-private room. **Be sure to bring your insurance card with you to the hospital when you are admitted.**

## **What is a usual day like?**

- 6 to 8 a.m. – Weekday rounds (you will meet the residents and medical students on your health care team)
- 6:45 to 7:45 a.m. – Nursing shift change (please only use your call bell for urgent requests at this time)
- 8 a.m. to 5 p.m. – Visits from members of your health care team for bathing, exercise, walking, tests, and other procedures
- 6:45 to 7:45 p.m. – Nursing shift change (please only use your call bell for urgent requests at this time)
- 8:30 p.m. – Nurses will help you get ready for bed

## **When are meals served?**

- Meals are served from 7:30 a.m. to 6:30 p.m.
- **The kitchen is closed from 10 to 11 a.m. and 2 to 3 p.m.**

## **How do I order meals?**

- Meals are ordered and delivered through Room Services.
  - › Phone: 902-473-8545
- A Room Services attendant will visit you if you need help. They can take your order during their visit.

- **Before bringing food from home**, talk with a member of your health care team.
  - › Your dietitian may have given you food guidelines to follow while you are in the hospital.
- Food trays are picked up 3 times a day, after each meal. If there is something you want to keep, put it on your bedside table so staff do not take it when they pick up your tray.

## Medication

- Make sure your health care team knows about all of the medications you are taking. This includes prescription and over-the-counter medications, vitamins, supplements, and herbal products. Please tell them if you also drink alcohol.
- When you come to the hospital, please **bring a list of all of your medications from your pharmacy**. Your nurses will give you your medications during your stay.

## How do I watch TV in my room?

- **There is a charge for this service.**
- Turn on the TV and follow the on-screen instructions or:
  - › Visit: [www.ConnectMyBed.ca](http://www.ConnectMyBed.ca)
  - › Phone (toll-free): 1-866-223-3686
  - › Use the written instructions on the unit
- Ask your nurse for more information.

## **Kitchen**

- There is a kitchen next to the unit entrance with a fridge, freezer, toaster, and kettle. If you are going to put food in the fridge, please ask for a label from the nursing station. **This is for patients only.**

## **Family room**

- There is a family room next to the kitchen. This is a quiet space with a phone for you and your support person(s).
- Dial 9 first to make an outgoing call.
- This room may not be available at certain times.

## **Interpreters and translators**

- An interpreter is available if you or your support person(s) do not speak English or understand it fully. This service is available 24 hours a day. An interpreter can:
  - › help you understand your condition and your care plan.
  - › ask questions for you.
  - › share information with your health care team.

## **Language Line**

- The Language Line gives access to interpreters in more than 240 languages by phone and tablet.
- Sign language interpreters are also available.
- Tell a member of your health care team if you need this service.

## **Diversity and inclusion**

- Nova Scotia Health expects the same respect among patients, staff, support persons, visitors, and volunteers, regardless of differences in culture, race, religion, age, sex, sexual orientation, gender, gender identity, or ethnicity.

# Staying safe in the hospital

## Getting the most out of your hospital stay

- We understand that this may be an emotional time. **We are here to talk with you and your support person(s) about your needs at any time.**
- The whiteboard in your room is used to give you, your support person(s), and your health care team information about:
  - › Your current mobility (how far you need to walk each day). Please check the whiteboard each day so you know how far you need to walk.
  - › Your expected date of discharge (EDD).
- We encourage you and your support person(s) to actively take part in your care, including every decision about your care. Research shows that people who are more involved in their care feel better and heal faster.

## Infection prevention and control

- **Washing your hands with soap and water is the best way to prevent infections.** Remember to wash your hands with soap and water:
  - › **before eating.**
  - › after using the washroom.
  - › after touching objects or surfaces in your room.
- Please feel free to ask your health care team members if they have washed their hands before they give you care.



## To help lower your risk of slipping or falling in the hospital:

- Wear shoes with non-skid soles.
- Put your shoes on before standing up.
- **If you feel dizzy, weak, or not steady, ask for help when you stand up.**
- Use your call bell if you need help.

## What will happen on my discharge day?

- Your health care team will work with you and your support person(s) to start planning for your discharge as soon as you are admitted to the hospital. They will help you get ready for your discharge and set the date you will go home.
- On your discharge day, you will leave the hospital **no later than 11 a.m.**
  - › This lets us get your room ready for the next person.

## Will I get a copy of my health record?

- Your nurse will give you discharge instructions and any prescriptions you may need. A summary of your hospital stay will be sent to your primary health care provider (family doctor or nurse practitioner), if you have one.
- **The unit cannot give you a copy of your health record.**
- You may ask for a copy by contacting Access to Personal Health Information (APHI). **There may be a charge for this service.** Ask your nurse for more information, or:
  - › Phone: 902-473-5512
  - › Email: [aphi@nshealth.ca](mailto:aphi@nshealth.ca)

## Patient survey

- Please fill out the survey to tell us what you thought about your hospital stay. **This is very important to help us improve patient care.**
- You **do not** have to fill out the form if you do not want to.
- If you do fill out the survey:
  - › **Do not** add any information that can identify you (like your name).
  - › Return the survey to the nursing station, or mail it using the envelope given.

## Patient representative

- This service is for you and your support person(s) to express your concerns, compliments, or feedback about any part of your hospital stay.
- To talk with a patient representative:
  - › Phone: 902-473-2133
  - › Phone (toll-free): 1-844-884-4177
  - › Email: [healthcareexperience@nshealth.ca](mailto:healthcareexperience@nshealth.ca)

## This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.