DESCRIPTION							
DESCRIPTION	Tim meets with Orthopaedic Specialist team	Tim is sent to have an ECG, Stress Test, Endocrine R/v and full bloods to assess and ensure suitability for surgery, or if any action to minimise risks prior to surgery.	Further assessment is requested from: • Endocrine - T2Dm and Transgender/ • Cardiologist • Physio	Paperwork completed Surgical booking made Education material provided to the patient	Pre habilitation is actioned during waiting time for surgery to improve excercise tolerance and reduce surgical risks	Pre admission clinic Anaesthetic consult Ortho surgery CNC R/V ?further bloods/ECg Pharmacy medication R/V	Tim presents to day surgery admission clinic and meets with all team members and is admitted for his surgery
WHO	 Tim Orthopaedic Surgeon Registrar 	 Tim Pathology lab Endocrinologist (book apt) Cardiologist (to book apt) 	 Tim Endocrinology practice, Cardiology clinic Physiotherapist Ortho surgeon 	 Tim Secretary (Admin) Surgeon/Specialist / Registrar • 	Tim Physiotherapist	 Tim Ortho JMO? Anaesthetic team JMO Pharmacy Radiology (ECG) PAC Nurse PAC admin • 	 Tim Ortho Surgical team Nurse Theatre team Ward clerk Anaesthetist DOSAC staff •
QUESTIONS	Tim asks How much will this cost? What are the risks of serious complications? Hospital Length of Stay When can I return to work Driving when? Need for a length of rehab Pain management Wait time Anaesthetic Continuity of Meds Who does the actual surgery? Specialist or Registrar? What are the risks of serious complications? Specialist Do we proceed with Surgery? What type of surgery should be performed? Financial agreement Is this a public or private patient? Acceptance of benefits versus risk by the patient in order to proceed	How much will this cost? Will it Hurt? How long will it take? Do I need time off work? Can I get it done all at once or at the same place? Where do I go to get it done?	 Why do I have to see all these people its only my hip? What are the results? Can I have the surgery? Are there long-term consequences of this diagnosis? How much will each of these visits cost? Will this delay my surgery or ability to go on the wait list? 	 What is the wait time? What do I do next? Who do I call to chase up? Specialist Is this an acceptable wait time? Are they public or Private? Insurance issues 	Physiotherapist • What is the baseline • What are the best exercises to improve mobility and manage pain while awaiting surgery? Also, prepare • and strengthen the body to improve recovery time.	 Are we going ahead? Where and when do I go? What do I bring to hospital? What meds do I take or stop, and how will this affect me? How long will I be in the hospital? PAC team Medications to stop pre-surgery and risks - e.g insulin 	Tim • When do I go? Can I • go home today, Can I • take my meds? How • long (delays)
DECISIONS	Public or private patient Category decision - what category are they for surgery Endocrine referral and cardiology referrals	Does the patient need further assessment?	Have any further assessment identified any issues that make patient unfit for surgery? Are any further investigations are assessments required?			 Male or female bed Where on surgical priority list 	
CHALLENGES	MONEY Wait time to see the specialist Support (lack of) Language barrier	Coordinating all these extra things means more time off work, Knowing where to go to get various tests and follow-up activities requested.	Chasing documents, Ensuring everyone knows what information has been captured to date and is also sharing information with others. Systems that don't share information. Time off work for patient = \$\$\$	Wait time Communication Paperwork / insurance	Communication Time off work for Tim as a Chef, shift worker.	Language Health literacy	Theatre time cancellations Fasted and Diabetic
FEELINGS -Patient							
	acceptance acceptance						
	apprehension		anticipation		annoyance		apprehension
FEELINGS Clinicians		annoyance					
			interest			vigilance	trust
	vigilance	neutral		annoyance	neutral		
Pickers 8 Principles	© Clear communication Ø Fast Access	Ø Effective care Ø Fast Access	Continuity of careEmpathy	© Continuity of care Patient involved		Ø Empathy Ø Clear communication	Ø Empathy
							Aitken SJ, et al. BMJ Health Care Inform 202