

## Contact details:

**Patient Support Service** (Monday to Saturday 08:00 - 16:30)

- for Bielefeld DGP (contracted hospitals): 0521 772 77282
- for Non-DGP (non-contracted hospitals): 0521 772 77843

**Patient Support Hospital Hotline (24/7)** 0800 5 88 99 36

### Garrison Transport

If you need transport to and from hospital during normal office hours (0800 – 1600) please call:

From Bielefeld and Gütersloh: 0521 9254 3219

From Paderborn: 05254 982 2842

Out of hours please call your Unit Welfare Office.

### Complaints:

GSTT Complaints Department  
7th Floor Haus Burgblick  
Gilead Hospital  
BFPO 39

### Medical Centres

Bielefeld 0521 9254 3131  
Sennelager 05254 982 2414  
Gütersloh 05241 84 2272  
Paderborn 05251 101 256

More information and answers to FAQ can be found on:

<http://www.patient-wise.de>

[www.facebook.com/gstgermany](http://www.facebook.com/gstgermany)

# SSAFA GSTT CARE LLP

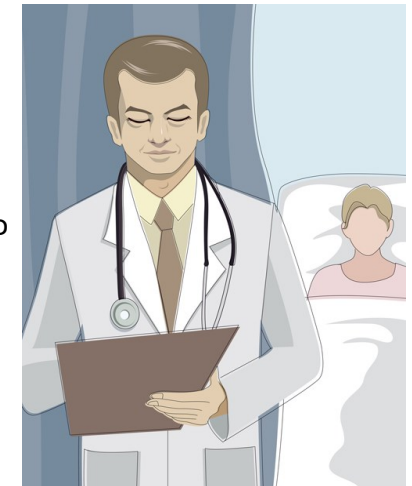
## Hospital Handbook for BFG patients

This handbook is for British Forces Germany (BFG) patients who are admitted or are going to a hospital in Germany.

Your healthcare experience should be as safe and comfortable as possible and to help with this you will find an overview of what you can expect, and how to resolve any issues you may have. A hospital has lots of different departments and many members of staff. Patients are admitted, treated and discharged every day. You can play an active role in your health care by ensuring that you are fully informed, and question if something seems wrong, even if it seems trivial. Staying well informed helps avoid communication errors and injuries.

If you are concerned about **anything** at all please ask a member of staff, or contact the Patient Support Service (PSS) via the (24/7) Hospital Hotline on **0800 5 88 99 36**.

There is space throughout the booklet to record details of what is happening before, during and after your stay in hospital. You could complete all the questions you are likely to be asked during your stay before going to hospital, and while in hospital make regular notes about your progress, examinations or tests, operations and outcomes. Write down any questions you want to ask the doctor and record the answers you are given.



This can be your permanent record and may be useful if you need further care at a later date, or to discuss your treatment with your GP or consultant. It can be used from the moment you have been referred until your treatment is complete.

# SSAFA GSTT CARE LLP

Jan 18

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	ST	lbs	LBS	KGS		ST	LBS	LBS	KGS
	8	0	112	50.5		12	0	168	76.3
	8	4	116	52.7		12	4	172	78.1
	8	8	120	54.5		12	8	176	80
	8	12	124	58.3		12	12	180	81.8
	9	0	128	57.2		13	0	182	82.7
	9	4	130	59		13	4	186	84.5
	9	8	134	60.9		13	8	190	86.3
	9	12	138	62.7		13	12	194	88.1
	10	0	140	63.6		14	0	196	89
	10	4	144	65.4		14	4	200	90.9
	10	8	148	67.2		14	8	204	92.7
	10	12	152	69		14	12	208	94.5
	11	0	154	70		15	0	210	95.4
	11	4	158	71.8		15	4	214	97.2
	11	8	162	73.6		15	8	218	99
	11	12	166	75.4		15	12	222	100.9

FT INS	CM		ST	lbs	LBS	KGS
4 0	122		4	0	56	25.5
4 2	127		4	4	60	27.2
4 4	132		4	8	64	29
4 6	137		4	12	68	30.9
4 8	142		5	0	70	31.8
4 10	147		5	4	74	33.8
5 0	152		5	8	78	35.4
5 2	157		5	12	82	37.2
5 4	163		6	0	84	38.1
5 6	168		6	4	88	40
5 8	173		6	8	92	41.8
5 10	178		6	12	96	43.6
6 0	183		7	0	98	44.5
6 2	188		7	4	102	46.3
6 4	193		7	8	106	48.1
6 6	198		7	12	110	50

### Your personal details:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Town: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_

Home Tel: \_\_\_\_\_

Mobile Tel: \_\_\_\_\_

Next of Kin:\* \_\_\_\_\_

Home Tel: \_\_\_\_\_

Mobile Tel: \_\_\_\_\_

GP Name: \_\_\_\_\_

GP Tel: \_\_\_\_\_

MC address: \_\_\_\_\_

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Further notes: \_\_\_\_\_

\_\_\_\_\_

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\*The next of kin should be a spouse, blood relative or close friend who can be contacted in case there are problems or questions.

## Before your planned admission:

You may have received an admission letter with your admission date and details about where to go. If not, ask your Patient Support Service to help you find out. See back page for telephone numbers. For more information on the PSS see page 6. If you cannot make your admission date or are unwell in the 3 days before admission please contact the number on your letter to re-arrange your admission, or call the PSS.

**Parking:** It is best to have someone drive you to the hospital as you may not be able to drive on discharge (medication or sedation), and parking is often difficult and expensive. If you need transport please call your Garrison Transport Office (see back page). Please call at least 48hrs before, but book transport as soon as you can.

You may be asked to go to the admissions office (Aufnahme) on arrival. If staff do not speak English, or ask you to complete forms which you do not understand, do not sign, but call the PSS for assistance on 0800 5889936.

In the admissions office you may be asked some questions including your name, address, date/place of birth etc. Please see page 3. If you can, please give your Unit address, not your home address. Please note: This has to be a German address/postcode for the hospital computer systems to be able to accept these details.

If you receive any medical reports please forward via BFPO to:  
GSTT NHS Foundation Trust, SHCAC  
Administration Office / Gilead Hospital  
Bielefeld BFPO 39.

Please email any bills to: [compliance@shcac.de](mailto:compliance@shcac.de)  
or post via BFPO to: GSTT Compliance Department, Gilead Hospital  
BFPO 39.

The timelines for paying the bills in Germany are very short. *Any delay could result in legal action. If you receive a reminder, please forward as outlined above.*

## Complaints and compliments

If you have any concerns about the care you received it is best to sort it out there and then by speaking to a member of staff immediately. If the ward nurse is not available please ask the PSS staff to help you. They can speak to the staff on your behalf and assist in resolving any problems. If you are not satisfied that your complaint has been adequately dealt with, you can make a formal verbal complaint to the PSO or write to the Complaints Department (address on back page). For further details please ask for our 'Making a complaint' leaflet, available from the PSS staff or check our website  
[www.patient-wise.de](http://www.patient-wise.de).

If a relative wants to complain on behalf of the patient they will need consent from the patient in writing.

*Some advice if you are making a formal complaint:*

- Please write as soon as possible after the event.
- Give as much detail as you can including your name and the name of the person (s) and department involved.
- If you are raising more than one concern it helps if you number each of the different points you are making. This will ensure that we understand each of your concerns and they can all be answered.
- ◆ Please add your address for the written answer and a telephone number so we can contact you if necessary.

If you have been very satisfied with your stay or someone has been particularly helpful, you can let the member of staff know before you are discharged or ask the PSS staff to let them know.

You may receive an electronic questionnaire after your discharge from hospital. Please complete this if you can, as your views are important to us and help shape and improve service provision.

## General information

*Visiting times:* mainly between 10am to 7pm but please check the official visiting hours with the PSS staff. Young children may not be allowed to visit all wards, so please check before visiting. In Intensive Care the hours are restricted, as are the number of visitors so please ask before visiting.

*Flowers:* Cut flowers can be brought in but potted plants are not permitted due to the possible bacteria in the soil.

*Smoking:* All German hospitals have a no smoking policy anywhere in the building. If you want to smoke please ask staff where you can go.

*Cafeteria:* For opening times please look by the entrance where this is usually displayed. If not ask a member of staff. Most cafeterias offer hot and cold drinks, cakes, hot food, and some also offer kiosk type items, such as personal hygiene items, magazines and toys, but it does vary so go along and have a look or ask the PSS staff.

*Telephone, television and radio:* Details about this are usually given on admission. A headset is required so if you have one bring your own, if not you can purchase one at the hospital. If you use the bedside phone or are allowed to use your mobile phone, please consider others with you and do not make any calls from the room after 10pm and before 6am.

*Self discharge:* All patients are strongly advised against discharging themselves and if they do so, they assume responsibility for any medical mishap, which may result. Service personnel are not to discharge themselves from hospital without the express permission of their Commanding Officer. In the first instance, they are to inform the PSS of the reasons for wishing to discharge themselves against medical advice. The PSS will then inform the unit in order for a decision to be reached. On self-discharge, all patients (whether serving or not) are to sign the appropriate form given to them by ward staff before leaving the hospital. They are advised to contact their unit medical officer as soon as possible (during normal working hours) after leaving the hospital to discuss their actions.

## What to bring:

- your admission letter, x-rays and copies of any medical reports
- current medication including over the counter medicine or herbal supplements (See page 12 for how to record medication)
- toiletries (soap and shampoo, toothbrush and toothpaste, brush or comb, shaving equipment, sanitary products etc.)
- hand, bath towel and flannel (the hospital does **not** provide towels and there are no facilities for personal laundry)
- glasses or contact lenses, hearing aid, mobility aids etc.
- nightclothes, dressing gown and non slip slippers or shoes
- day clothes - a tracksuit/comfortable clothes, shoes and a coat
- small change for the telephone, vending machines, cafe or kiosk
- name and contact numbers or address book, paper and pen
- books and/or magazines
- Audio equipment (remember to bring earphones/headphones so that other people in the room are not disturbed by the noise).
- A phone charger or plug.

Please do not bring any jewellery, valuables or alcohol. Please do not bring large bags/suitcases as storage space is very limited. **The hospital cannot accept liability for any items stolen or damaged.**

Some hospitals offer internet access and allow laptops, others don't. Please ask your PSS to check for you before you go to hospital.



## Discharge from hospital:

Although discharge from hospital is usually during the morning, it can be any day of the week and at any time. The doctor will inform you when you are fit to go. If you feel you are ready to go home do ask the doctor about discharge.

Once your discharge has been confirmed you need to remember the following:

- you will receive a discharge note or letter from the doctor at the hospital for you to take home.
- medication: if you are in a contract hospital you will be provided with medication for 10 days (if you need medication after discharge).

in a non-contract hospital medication to take home is not supplied but you may be given a prescription. Call the 24/7 Telephone Assessment Service (TAS) via your local medical centre or on 0521 3053961 and they will advise about your nearest dispensary (Apotheke).

- when you have been discharged please call the 24/7 Telephone Assessment Service (TAS) **the next working day** for all your ongoing medical needs (Sick note, stitches removal, doctor's appointment etc.) Call your local medical centre number or call direct on 0521 3053961.
- disconnect the telephone and television if used, and get your deposit and any monies remaining back (any problems please ask a member of staff or call the PSS for assistance).
- return any DVDs, tablet PCs, books and magazines.
- If you need transport during office hours (Monday to Friday 0800 – 1600) please call:

From Bielefeld and Gütersloh:  
Tel: 0521 9254 3219.

From Paderborn:  
Tel: 05254 982 2842.

Out of hours please get in touch with your Unit Welfare Office.

## Cultural differences:

There are some cultural differences you should be aware of.

### Rooms:

In German hospitals the wards (Station) have individual rooms which can have 1,2 or more beds in it. Some rooms will have a bathroom attached but some will be located in the corridor. German hospitals are generally quieter and do not have as many people wandering about as there are few outpatient clinics. They favour rest and recuperation. The nurse will not disturb you routinely **so if you need anything at all please use the bell provided** or go to the ward office and ask for help.

### Screens and curtains:

In most German hospitals curtains or screens are not used to protect your privacy and dignity. If you require privacy for an examination or discussion please tell the doctor or nurse and ask if you can go into a treatment room or private area. During ward rounds the doctor will speak to all the patients in the room, but if you want to have a more private conversation with the doctor, please let the staff know in advance and they can book an appointment for you to talk to the doctor.

### Medication:

Your medication for the day usually comes in a tray, with your name on it (if not please ask if this medication is for you). The tray has compartments labelled Morgens (a.m.) Mittags, (lunchtime), Abends: (evening) Nacht (night). If you are unsure about anything to do with your medication please ask the doctor or nurse. **Please note: Pain relief is dispensed on request and please make sure you ask for this if you have any discomfort. Nurses are not allowed to alter your medication without a doctor's authorisation.**

### Food and drink:

The main meal (hot food) is at lunchtime, breakfast is usually fresh rolls and ham and cheese, jam, coffee and tea. There are usually lots of teas to choose from but you may want to take your own teabags with you as the German black tea is different. When asked about your food remember to include fresh milk if you like this in your tea as the coffee milk provided is often more like condensed milk. Evening meal is usually cold meats and bread. If you have any issues with ordering food or do not understand the menu please ask the PSS for assistance.

**On the ward:**



Once your admission paperwork has been completed you may be handed a folder or sheets with sticky labels and asked to go to the ward. Please have a look at the labels and inform staff if these are incorrect in any way, as they are used throughout your stay on anything to do with your care: blood tests, consent forms, medical notes, etc.

On the ward report to the ward office (Dienstzimmer/Pflegepersonal). One of the nurses will either continue your admission process and show you your room and explain how it all works or you may be asked to wait until your room is ready. The nurse will also ask you some questions and may take your blood pressure. Some of the questions:

Your height: .....**cm** and your weight:.....**kg\*** (see page 26 and 27 for height and weight conversion charts).

Previous operations: (i.e. Tonsillectomy in Nov 2010)

.....  
.....

Last hospital stay/GP treatment .....

Blood group: (Show card if you have one).....

Your diet: normal .....diabetic.....gluten free.....

Do you wear glasses/contact lenses/hearing aid/false teeth.....

Do you need assistance (dressing/bathing/feeding).....

Do you have any allergies (hay-fever/plasters/medication.....

Are you taking any medication (prescribed/over the counter/herbal supplements or vitamins (Name and dosage/take packets or list of medicine with you to hospital). .....

See medication page 13 where you can record this.

The doctor will usually come to see you the day after your operation as the day of your operation you may not be able to understand or remember what is said to you. Do tell the doctor if you do not understand, and he/she will explain further. Any problems speak to your PSS staff.

If you need physiotherapy, your doctor will advise you and also discuss any post-discharge rehabilitation required. He/she will also tell you how much longer you will have to stay in hospital, when the stitches will come out if they do not dissolve by themselves etc. Do write down any questions you have for the doctor below and record the answers for future reference.

**Blank for your questions and answer notes:**

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**Your operation:**

If you are to have surgery you will need to be prepared for it. The nurse may measure your legs to see what size of support stockings (anti-thrombosis stockings) you will need. You will have to put these on before surgery and be aware they are hard to pull up. If you cannot manage it yourself please call the nurse to help you. You will also be given a surgical gown to put on. You will need to remove your underwear, make-up, nail varnish and jewellery, spectacles, lenses, false teeth and hearing aid, if applicable. Depending on the surgery you may be asked to shave the area around the operation site. If you want you can usually do this yourself. If not the nurses will assist.

You may be given medication (a pre-med), to help calm your anxiety before the surgery. You may have been given an estimated time when you may go to theatre. However, please be aware this may change as emergencies may need to take priority. The nursing staff should keep you informed, but if you are at all concerned please ask.

When you have been given your pre-medication **stay in bed**, if you need anything at all please call the nurses. Once taken to theatre the anaesthetist should ask you for your name and if you know what you are there for. This may seem odd as they should know, but this is part of a safety check to ensure you know what is going to happen and you are the right patient.

When the operation is over, you will go into the recovery area for a while. Once you have recovered sufficiently you will either go to the ward or if you need additional monitoring you may be transferred to the intensive care unit (ICU) ITU in German. Transfer to ICU does not always mean that there is anything seriously wrong! It may be that patient rooms are small, the door is usually closed, and the nurse cannot see the patient, therefore you may have to go to the ICU to enable closer monitoring. You will be advised when you can eat or drink again.

**Please discuss with the staff any questions you may have. Do not hesitate to call the nurses if you are in any pain or feel unwell.**

**Blank page for your notes:**

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**The Doctor:**

The doctor will see you, examine you and ask further questions about your previous medical history. You may wish to record the answers below. The following are some of the questions you may be asked:

1. What are your symptoms and how long have you had them?  
 .....  
 .....
2. Is there anything that makes your symptoms worse or better?  
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 .....
3. Have you had any serious illnesses or accidents?  
 .....  
 .....
4. Have you ever been admitted to hospital?  
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5. Have you had surgery before?  
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6. Do you have any allergies?  
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**Pain register continued:**

Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	
Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	
Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	
Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	
Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	
Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	
Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	
Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	
Date:	Time:	Comments:
0 1 2 3	4 5 6 7 8 9 10	

**Pain relief:**

If you are in any pain you **must** let the doctor or nurse know. Otherwise they will assume you are pain free or that the pain relief provided is sufficient. Pain relief can be in tablet or liquid form, via injection or drip, but be aware that sometimes you may be offered a suppository. The tell tale signs are: they come in tin foil wrappers, are cone shaped and are usually accompanied by a glove! They should be inserted into your 'back passage'. This is gentler on the stomach but if you do not want this please let the nursing staff know and ask for an alternative.

If you have pain, you may wish to keep a record. The pain scale is from 0 –10, if you have no pain at all you would record 0, if you are in the worst pain possible you would record 10. Record the date and time, as your doctor may wish to know how you are feeling and coping with the pain.

Here is an example below:

Date: 22 August Time: 10am Ring (4) Comments: Just had a shower  
0 1 2 3 (4) 5 6 7 8 9 10

Date: Time: Comments:  
0 1 2 3 4 5 6 7 8 9 10

Date: Time: Comments:  
0 1 2 3 4 5 6 7 8 9 10

Date: Time: Comments:  
0 1 2 3 4 5 6 7 8 9 10

Date: Time: Comments: .  
0 1 2 3 4 5 6 7 8 9 10

Date: Time: Comments:  
0 1 2 3 4 5 6 7 8 9 10

Space for questions you want to ask your doctor and record the answers:

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**Medication:**

It is important that you know about your medication: what strength, when you should start taking it, how often you should take it, with food or without, what it looks like, side effects and why you are taking it. You should ask the doctor whether there is anything you should be aware of when taking this medication. (No alcohol/driving or whether certain foods affect the medication etc).



Keep a list of all the medication you are currently using and what you are given in hospital; name, dosage, start date, colour and size. If you are unsure of what you are taking or when you are to take the medication, please ask! If the medication looks different to what you are used to, say so, and ask why has there been a change.

If you are at all unsure, **do not** take the medication until you have had a satisfactory explanation by the doctor or nurse. If you are still unsure call the PSS or the Hospital Hotline for assistance. Telephone numbers on the back page of this booklet.

**Medication list:**

Name:	Date medication Started:	Dosage and how often to take:	End date:

Have you ever been treated for psychiatric problems e.g. depression?

.....

Disease of the skeletal system (e.g. injuries to the spine, or joint disease)?.....

Muscular disease or weakness, predisposition to malignant hyperthermia?.....

Do any of your blood relatives have or have they had a muscular disease?.....

Disease of the blood or tendency to bleed excessively (do you develop bruises for no apparent reason, nosebleeds)?.....

Allergies/Allergic reactions (e.g. hay fever, allergy to any foods, medication, plasters, latex gloves)?  
If yes, please indicate.....

Any other diseases (e.g. disease of the immune system, skin disease, meningitis, tumours, poisoning)?  
If yes, please indicate.....

Other health factors (e.g. accidents, severe injuries, special job related factors)?  
.....

Do you smoke? If yes, how many per day?.....

Do you drink alcohol regularly? If yes, how much per day?.....

Space for your notes:

.....  
 .....  
 .....  
 .....  
 .....

**Anaesthetic consent form:**

Some of the questions you may be asked:

Age.....years/Height..... cm/Weight.....kg (see p 26/27)

What is your present occupation? .....

Do you wear a hearing aid/contact lenses/have removable dental prosthesis? .....

Do you have teeth or gum problems?.....

Do you have loose teeth? .....

Have you been under medical care recently?

If yes, what for? .....

Do you take medication regularly (pain, sleep, heart, circulation or blood thinning agents such as aspirin)?

If yes, please indicate type and amount per day.....

Have you ever had surgery?

If yes, when and what type of surgery.....

Were there any problems as a result of the anaesthesia?

If yes, please indicate .....

Did any blood relative ever suffer a complication of anaesthesia?

Have you ever had a blood transfusion? .....

If yes, were there any complications?.....

Have you donated your own blood for this proposed surgery?.....

For women of child bearing age: Are you pregnant? .....

Do you have/have you ever had one of the following diseases:

Heart disease (e.g. infarct, angina pectoris, heart defect, breathing difficulties on exertion, myocarditis, heart rhythm Irregularities)? .....

Disease of the nervous system (e.g. epilepsy, paralysis)? .....

Name:	Date medication Started:	Dosage and how often to take:	End date:

**Blank page for your notes:**

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**Consent forms:**

If you need an investigation or operation, you may be given a declaration of consent to sign. This form will explain why you need the investigation or operation, what is to happen, how it will happen, possible side effects and risks, what is necessary before and after, as well as the expected outcome.

Consent forms in the contract hospitals, Designated German Provider (DGP) hospitals are in English but some non contracted (Non -DGP) hospitals will have German forms only. There are usually pictures to help with the explanation. The doctor will discuss the procedure with you. Please ask any questions you may have. If you do not understand ask for further explanation and do not sign until you do understand. If you have any problems at all contact your PSS or Hospital Hotline (see back page for numbers).

**Anaesthetic consent form:**

If you need any type of anaesthetic you will be given an information sheet. The purpose of the information sheet is to inform you about the various types of anaesthesia available and to prepare you for a discussion with the anaesthetist. He/she will talk about the most appropriate type of anaesthesia for you and explain the risks and possible side effects.

You may be given medication the night before the operation to help you sleep, and tablets to settle any stomach acid which can build up. The anaesthetist will discuss this at the consultation. Let him/her know if you are really anxious.

You should sign the form in the presence of the doctor only when you are satisfied that you have understood everything and have no further questions. The doctor will ask if you have any further questions and if not he/she will also sign the form. If a Patient Support Officer is present for the translation they may also have to sign to confirm their presence and that they have translated for you and the doctor. On the next 2 pages are some of the questions you may be asked.