



DAY SURGE

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In Your Envelope:

- Membership Form
- Membership Competition
- Conference Registration

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President's Report

Dear Colleagues,

The 10th Anniversary conference is fast approaching. We have received enormous support from our trade reps and you have a registration form enclosed in this issue. So, diary date the 10th September and we will see you at the Sofitel Wentworth in Sydney.

A recent education session have took us to Orange on the 30th of April. It was lovely having a sight-seeing trip of the area. Orange itself is a lovely town and Orange Day Surgery Centre was equally lovely. Wendy Baker, the DON of the facility, coordinated a very informative day and Dr Hook gave a great presentation on Lap Cholecystectomy. It is interesting to see how often, in areas that do not have the resources of the major cities, centres become very innovative. A major hurdle to overcome in the rural setting of course, is that the patients live further away and often in remote areas. So, post-op care is vital to these

patients, to ensure safety. Through careful planning by the surgeons in the area, who have extensive experience both nationally and internationally, a thorough and planned patient care delivery has been developed. Of course having state of the art facilities such as ODSC has added great benefits and quality care to the Orange community. I certainly was very impressed.

The second meeting we had was at POW Day Surgery. Please read the report below.

In closing, just a reminder that membership renewals are due as the membership year finished on June 30.

If any one would like to write an article for the journal, things like surgery you are doing, nursing care or quality activities you have done. You can contact either Celia Leary or me.

Until next time keep safe!

Jacqueline Hurley

Education Evening

Marie Chacko organized our evening at Prince of Wales on June 20. POW Day Surgery unit is a 23hr centre that has 10 beds and a throughput of 20-35 patients per day. Marie took us on a tour of the unit, which was most interesting.

Sue Rovelli, the Breast Care CNC, talked to us about the multi-disciplinary approach to supporting patients through their breast cancer journey, starting within 72 hours of diagnosis. Issues such as coping with the diagnosis, anxiety, body image and prognosis are dealt with. Registrar Gary Yee then spoke about the latest trends in breast cancer surgery. He outlined the procedures undertaken on a day surgery basis as well as more extensive breast surgery requiring

longer stays. Patients undergoing a complete local excision with or without sentinel node biopsies can usually go home the same day. If a patient requires a drain, as in CLE with axillary dissection, the patient usually stays a day or so and is discharged in the care of a community nurse. Gary recommended the National Breast Cancer Centre of Australia website for information about breast cancer for consumers and health professionals. Have a look at www.nbcc.org.au.

Thank you Marie, for organizing an informative evening. We were made more aware of how much day surgery is occurring in this field of medicine.

Breast Surgery as a Day Procedure - A Patient's Perspective



From the time I was diagnosed with breast cancer, I was most anxious to have the necessary surgery to rid my body of the unwanted tumor. During our first meeting with the surgeon, my husband John and I found that not only was he a highly competent surgeon but that he also had a devoted team of medical assistants working with him. One of the assistants, a breast cancer survivor herself, sat with us throughout the discussions. She was not a nurse, nor was she wearing any type of hospital uniform. Her warmth and openness bridged the gap that sometimes occurs between a doctor and patient. She could put her arms around me and give me a hug whereas the doctor could not. This teamwork did much to relieve us of anxiety and give us confidence in the type of care I would receive. If I had questions, Lilly was my best resource – she always returned my calls very promptly. She was also there to greet me at 6:30am on the day of surgery.

My surgery went well – a lumpectomy with node removal. The results indicated I was Stage 2 and my recommended treatment was chemotherapy followed by radiation. I was discharged around 1pm and was given detailed instructions on emptying and recording the amount of fluid from the drainage bag (which stayed in for 10 days), and how to care for my wounds. Fortunately there

were no complications and it was wonderful to go back home for my rest and recuperation. I did not need home nursing care but it was available to me if I needed it. I was given exercises to do each day to ensure I retained full range of movement of my arm and I had the added benefit of a supportive family and many friends who encouraged me daily. I would highly recommend day surgery to any woman who has to go through this procedure, as long as she has the approval of the surgeon.

Rhonda Griffith

Editor's Note:

Rhonda was diagnosed with breast cancer while holidaying in Sydney and on the advice of a surgeon here, returned to the US to have all her treatment, including surgery, coordinated from the Johns Hopkins Breast Center in Baltimore, Maryland. Rhonda had her surgery in 2002 and is doing well.

It is interesting to note the differences between some Australian centres and the unit where she was treated with Rhonda being discharged with a drain, on the day of surgery.

Her story highlights the importance of a co-ordinated team approach, particularly in the pre-admission preparation, in order that this type of surgery is compassionately and successfully carried out in a day surgery setting.



International Conference

In April, my employer, Lismore Private Day Surgery, generously supported me to attend the 6th International Congress on Ambulatory Surgery, on the 24th to 27th April 2005, in Seville, Spain.

Australia was well represented at the Congress with 32 participants.

Seville is a beautiful city with both Christian and Muslim heritage and I was entranced by the sights to be seen and the scent of orange blossom. Our Spanish colleagues put on a well-organised event with a challenging anaesthetic, nursing, surgical, quality and management program as well as an exciting social program. All of us who stayed up until the wee small hours for the Flamenco, dancing Andalusian horses, bull fight and dinner, will attest that Spanish wine, cuisine and hospitality will be hard to match in 2009 when Australia hosts the event in Brisbane.

Day Surgery continues to grow around the world and countries face many similar challenges

in its development. I was not at all surprised to note that Day Surgery in Australia is well advanced and highly regarded internationally. (for example the European Union uses ACHS day surgery clinical indicators.)

Highlights for me included the moving opening ceremony lecture by I. Kakande, of Uganda, who highlighted to plight of many of the third world countries. He reported that poverty, population growth, disease, ignorance and war/conflict, continue to place enormous pressure on any health care system in Africa, making day surgery, as we know it impossible.

I particularly enjoyed the update on post operative nausea and vomiting (PONV) by K. Korttila (Finland) and T.J. Gan (USA) and recommend the web site www.ponv.org

Thank you Glenn and Carol Taylor for giving me such a wonderful opportunity and I look forward to inviting the rest of the World here in 2009.

International Congress Calendar

Plan Ahead!

2007

Amsterdam,
The Netherlands

2009

Brisbane, Australia

2011

Aarhus, Denmark

Q & A

Question:

How many of you are doing Laparoscopic Cholecystectomies in free standing facilities? Do patient's go home the same day? Are they 23 hour centres? Many Day Surgeries are performing this procedure, but often it is when they are attached to an overnight facility rather than day only.

Answer:

Rosemary McDonald, Director of Clinical Services at the Castle Hill Day Surgery replied:

We are a free standing Day Surgery and have been open for 4 1/2 years and have recently received a 23 hour licence. We have been doing Laparoscopic Cholecystectomies as day only procedures,

since we opened. We have performed in excess of 200 Laparoscopic Cholecystectomies and only one of these patients has required subsequent open abdominal surgery & transfer to a nearby private hospital with whom we have an arrangement. Patients undergoing this procedure have done exceptionally well. Of course, they are carefully selected and meet the criteria for day only patients undergoing this type of surgery.

Next Question!:

Do you ask your patient's undergoing flexible endoscopy to change out of their street clothes and into hospital gowns?

Please send your replies to:
dsnansw@hotmail.com or to the editor at
lillian.stibbs@sah.org.au

Apology

Due to an Australia Post clerical error, our post office box was temporarily closed without them having the courtesy to contact us. Our apologies to all of you who had your membership renewals returned. Thank you for your calls and emails to make us aware of the problem and for your patience and support.

Day Surgery Spotlight

Day Surgery Centre Royal North Shore Hospital

The Day Surgery Centre at RNSH commenced operating May 1987, in refurbished facilities developed from the original operating theatres. It was developed as a free standing facility in most respects and independent of the Main Operating Rooms.

Surgical specialties include gynaecology, general, ENT, dental, urology, plastics, ophthalmology, breast and endocrine. Paediatrics makes up approximately 30% of our patient load. The majority of staff are multi-skilled or working towards multi-skilling to provide a great team, highly

respected and capable of supporting the services required over the day.

Currently the Day Surgery Centre is still providing services independent of the Main Hospital but works much more closely with Main Operating Rooms and the 23 hour ward, to ensure more efficient utilisation within the current budget restrictions and planning continues towards future services.

Tricia Murrell
Centre Manager (since 1994)

Notes, Quotes and Anecdotes

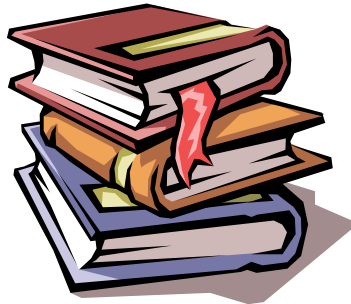
All you ever wanted and didn't want to know about bananas!

Bananas are high in iron and can stimulate the production of haemoglobin and so help in cases of anaemia.

According to a recent survey undertaken by MIND amongst people suffering from *depression*, many felt much better after eating a banana. This is because bananas contain tryptophan, a type of protein that the body converts into serotonin known to make you relax, improve your mood and generally make you feel happier.

Those keen on natural alternatives swear that, if you want to kill off a wart, take a piece of banana skin and place it on the wart, with the yellow side out. Carefully hold the skin in place with a plaster or surgical tape!

Courtesy of the Cooperative Research Centre for Tropical Plant Protection



EDUCATION CALENDAR

Queensland Education Dates

All dates are listed on the ADSNA website at:

www.adsna.info/memberstates/qld/2005calender.htm

CONFERENCE, CONFERENCE, CONFERENCE!

September 10

DSNA NSW 10th Anniversary Conference

Diversity, Alerts and You

Venue: Sofitel Wentworth
Phillip St, Sydney

Time: 8:30 am – 4:30 pm

OTA Dates

October 12

Topic: Anaesthetics and Recovery

Time: 6:30 pm for 7 pm start

Venue: The College of Nursing, Burwood
see www.nsw-ota.asn.au

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