

YOU ARE LEAVING HOSPITAL FORM – STAFF GUIDE

Instructions on how to complete the form prior to patient discharge



Discharge Date

Note: the date will assist the patient / carer to identify current instructions and as a reminder of the date when making follow up appointments with GP / referral services

Reason for admission

Briefly specify reason for this admission

Take Home

This is provided as a reminder to the patient, but it's a good reminder to ensure that the medication profile or discharge summary information is attached to this document. Cross out any that don't apply in this instance (e.g. own medications returned)

Access to Closing the Gap medications

This is a community based program and SA Health committed in 2017 to match the support for eligible patients:

- Be an Aboriginal or Torres Strait Islander person
- Have or be at risk of chronic disease
- Be registered for the Closing the Gap (CTG) medicines in your community by your GP, health practitioner, or Aboriginal Health Service (AHS)
- Access your medicines through the Remote Area Aboriginal Health Services (RAAHS) Program – Section 100

Rehabilitation

Complete any details that apply
At = Location

Treating Medical Team

Complete information and provide phone number for follow up

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YOU ARE LEAVING HOSPITAL

UR Number: _____
Discharge Date: _____

Has your family been informed you are coming home?

Reason for Admission

Take Home

Discharge Medications
 Medication Profile / List (attached)
 Discharge Summary (attached)
 Belongings / Equipment
 Own medication returned

Your Discharge Medications
Tell hospital staff if you are eligible for Closing the Gap medicines in your community as you could receive help with the costs of your medicines.
Before you leave hospital, make sure you know how to take your medications.
If you need help after you go home, take your medications and any paperwork to your GP/Clinic or local Chemist.
Your GP/Clinic will give you any more prescriptions.
If you are worried about your medicines or tablets, please ask for help before you go home.

Referrals
You have been referred to the following services to support your current needs on discharge.

Clinic/Doctor
Date/Time _____ Phone _____
 Hospital/Health Centre
Date/Time _____ Phone _____

Palliative Care
Date/Time _____ Phone _____
 Aged Care Assessment Team
Date/Time _____ Phone _____

Transitional Care Plan
Date/Time _____ Phone _____
 Home Monitoring (iCCnet/VCCnet)
Date/Time _____ Phone _____

Integrated Team Care
Date/Time _____ Phone _____
 Country & Outback Health
Date/Time _____ Phone _____

Transport Arranged (based on Patient Condition and Medical Clearance)

To Steppedown unit Ambulance Taxi
To Closest Hospital to Home Ambulance Flight
To Home Bus Flight Ambulance Taxi
To RACF Taxi Ambulance Flight

Patient Assistance Transport Scheme (PATS) form signed by Acute Care Specialist

Referrals

Complete any details that apply

Transportation Arranged

Complete any details that apply

Follow Up Rehabilitation

Speech At _____ Date/Time _____ Phone _____
 Physiotherapy At _____ Date/Time _____ Phone _____

Exercise At _____ Date/Time _____ Phone _____
 Social Work At _____ Date/Time _____ Phone _____

Occupational Therapy At _____ Date/Time _____ Phone _____
 Diet At _____ Date/Time _____ Phone _____

Additional Notes

Ensure that you follow all health advice provided to you. If you are feeling unwell or not improving as expected, you may need to contact the following services:
> Your GP
> Health Direct 1800 022 222
> Treating Medical Team (if appropriate)
Doctor / Unit: _____
Phone: _____

In case of emergency please call triple zero (000)

Hospital Phone Numbers

Metro Hospitals	Front desk	Aboriginal Liaison Unit
Flinders Medical Centre	08 8204 5511	08 8204 6359
Lyell McEwin Hospital	08 8182 9000	08 8182 9206
Royal Adelaide Hospital	08 7074 0000	08 7074 5460
Women's and Children's Hospital	08 8161 7000	08 8161 6237
Country Hospitals		
Berri	08 8580 2400	08 8588 0424
Ceduna	08 8626 2110	
Ceduna Koonibba	08 8672 5255	
Cooper Pedy	08 8672 5009	08 8672 5376
Umoona Tjutagku	08 8672 5255	
Walleroo	08 8832 0200	08 8832 0100
Mount Gambier	08 8721 1200	
Pangula	08 8724 7270	
Murray Bridge	08 8535 6777	08 8535 6777
Moorundi	08 8531 0289	
Port Augusta	08 8668 7500	08 8668 7500
Pika Wiya	08 8642 9904	
Port Lincoln	08 8683 2200	08 8683 0162
PLAHS	08 8683 0162	
Whyalla	08 8648 8300	08 8648 8300
Nunyara	08 8649 4366	
Nganampa	08 8954 9040	
Port Pirie	08 8638 4500	08 8633 0585

Many Aboriginal Liaison Units (ALU) are only staffed Monday-Friday, 9am-5pm. For help, ring the front desk.

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Blank box

Provide hospital address / contact info – written or stamp