



Queen Elizabeth Hospital Birmingham Surgical Assessment Unit (SAU) Virtual Ward

What is a Virtual Ward?

For patients who are well and only in hospital for observations, or treatments that can be taken at home, being on a Virtual Ward means you can spend time at home rather than in hospital.

A Virtual Ward is also the best place for you if you are waiting for investigations or day case procedures, as you could be waiting longer for these to take place if you were an outpatient. You have the same priority for any investigation or treatment as patients who remain in hospital.

Being at home not only means you should be more comfortable, but also helps the hospital make beds available for other patients who need them. You will remain under the care of your consultant while you are on the Virtual Ward and they will continue to monitor you closely. If you feel unwell, you can return to the Surgical Assessment Unit (SAU) at any time, for any reason. Please call first to let us know you are coming so we can try to ensure that there is a bed available for you.

You should keep this leaflet with you whenever you leave your home so that you can show it to any medical professional who may need to see it. For example, if you need to call an ambulance with the same pain, the ambulance crew will know to take you straight to SAU rather than to the Emergency Department.

Why am I suitable for a Virtual Ward?

You are suitable for a Virtual Ward because your condition is stable and doesn't require any intravenous fluids or antibiotics. Additionally, any pain you have is controllable with tablets.

Your condition is:

You are waiting for:

When you go home, it is important that you drink adequate fluids and eat as normal. We will send you home with the medication that we want you to take and with painkillers if required. If we do send you home with painkillers then we will also give you some laxatives, as painkilling tablets can cause constipation.

What will happen when I am at home?

While you are at home your case will be discussed every morning so we can check when tests or procedures have been booked. We may ask you to record your temperature, blood oxygen levels and heart rate while you are at home. If we need you to do this we will give you a thermometer, a pulse oximeter and a diary to record the readings. You will get a phone call every morning from one of our specialist clinical practitioners or junior doctors to check that you remain well and also to let you know about the progress of any investigations. If you have been asked to record your temperature, blood oxygen levels and heart rate, these readings will be noted during the conversation. These conversations will be recorded in your notes. Please engage with these calls

Information for Patients

on a daily basis – if you do not you may be discharged from the Virtual Ward. If there is any concern from either the medical staff or yourself that you are becoming unwell, we will arrange for you to return to SAU so that we can reassess you and, if necessary, keep you in hospital for further treatment.

While you're at home you will need to remain isolated from everyone outside your immediate family. Please do not go to work.

If you are waiting for an investigation (such as a CT scan or MRI Scan) you will be contacted either by the department which is responsible for the test or by one of the nurses from the virtual ward to confirm the date and time, and where to come for your investigation.

If you are waiting for a procedure (such as an ERCP or a laparoscopy), we will give you a call before your procedure to confirm a time to come back to either SAU or a day case unit for your procedure. In most instances, you will just need to be on the ward ready to go down for your procedure; you will not need to be admitted into a bed.

After you have had your investigation or procedure you will be able to go home as soon as it is safe (most of the time this will be on the same day) and we will discuss the results when they are available. You will be kept updated by the daily phone calls and informed of the future plans. These plans may include further investigations or procedures on the Virtual Ward, follow up as an outpatient or discharge. Under certain circumstances it may be agreed with the Consultant in charge of your care and yourself to reduce the frequency of the telephone contact if daily contact is no longer required and you are happy with this arrangement.

Please be aware that many investigations have to be reported and typed so results may take some time to come through.

What happens if I start to become more unwell or get more pain?

If you start feeling unwell you can return to SAU at any time and for any reason. We would ask that you give SAU a call on **0121 371 4065** or **0121 371 6025** so that we know that you are coming and whether or not we need to see you in clinic or find a bed for you. You can also ring the ACP team between 08:00–15:00 on **07552267227**.

Information for medical professionals at the Queen Elizabeth Hospital Birmingham (QEHB)

For Emergency Department staff

This patient is on a Virtual Ward at the QEHB. This means they are already under the care of the emergency general surgical team.

If the patient is presenting with the same condition as detailed above or with a general surgical complaint, the patient can be directly streamed back to SAU without being seen or assessed in ED. We would be grateful if you could let the SAU team know that the patient is coming by calling **0121 371 4065** or **0121 371 6025**.

If the presenting complaint is obviously not the condition detailed above and not general surgical in nature (e.g. severe chest pain, shortage of breath or a fracture after a fall) then you should treat the patient as though they were being seen as a new presentation, following your usual pathway.

Information for Patients

For non-QEHB medical professionals

This patient is on a Virtual Ward at QEHB. This means they are already under the care of the emergency general surgical team.

If the patient is presenting with the same condition as detailed above or with a general surgical complaint, they should be referred directly back to SAU at the QEHB, bypassing ED. If you are a Birmingham GP or work for WMAS, please use your normal referral method for such a referral to SAU at QEHB. We would be grateful if you could let the SAU team know that the patient is coming by calling **0121 371 4065** or **0121 371 6025**.

If the presenting complaint is obviously not the condition detailed above and not general surgical in nature (e.g. severe chest pain, shortage of breath or a fracture after a fall) then you should treat the patient as though they were being seen as a new presentation, following your usual pathway. We would still be grateful if you could let the SAU team know by calling **0121 371 4065** or **0121 371 6025**, so that we are kept informed.

For all medical professionals

If you wish to know more about the patient's condition for whatever reason, please contact the general surgical SpR on **0121 371 2000**.

Please use the space below to write down any questions you may have and bring this with you to your next appointment.

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on its right side, suggesting it's resting on a surface. There is no handwriting or other markings on the paper.

Information for Patients

Emergency General Surgical Unit

Queen Elizabeth Hospital Birmingham

Mindelsohn Way, Edgbaston

Birmingham, B15 2GW

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email interpreting.service@uhb.nhs.uk