

Welcome to the Trauma Service

Trauma Service

The Royal Melbourne Hospital is one of Australia's busiest trauma and teaching hospitals. We care for over 4000 patients with traumatic injuries (broken bones, brain damage, spine injuries) each year from all over Victoria.

Traumatic injuries are caused by car, truck, pushbike, motorbike and quad bike crashes, falls, assaults, workplace and pedestrian accidents and sports injuries.

What is the Trauma Service?

The role of the Trauma Service is to oversee and coordinate your care whilst you are in hospital. You may have suffered from a variety of injuries that require specialised surgery, for example internal bleeding, a broken leg, and some damage to your brain. You may need a trauma surgeon to operate on your internal bleeding, an orthopaedic surgeon to operate on your broken leg and a neurosurgeon to operate on your brain. The Trauma Service will ensure that all the teams are aware of your injuries and will coordinate any tests, procedures and operations that you may require.

The Trauma Service is a multidisciplinary team and includes the Director of Trauma, Deputy Director, Trauma Surgeons, Registrars and Residents (senior and junior doctors) and Senior Trauma nurses (Clinical Nurse Consultants).

At times it may seem like you are seeing many doctors from many different teams who are telling you a lot of information. This is because they all have a special role to play in your treatment and recovery; the Trauma Service can help clarify who everyone is and their role in the team.

What will happen during your stay?

Being hospitalised or having an injured family member can be a very stressful time, especially when you are far from home. We want to ensure that you and your family receive the best possible care whilst an inpatient. This means being cared for by doctors and nurses who specialise in the care of patients with traumatic injuries. All trauma patients admitted to the hospital require different care and we will tailor this to your needs.

The Trauma Service doctors and nurses will visit you each day in hospital and, are the key people to help you with any concerns or any questions you may have. You will also be seen by other doctors and specialists who are involved in your care. At times you may also be seen by other health professionals such as a Physiotherapist, Occupational Therapist, Social Work or Speech Therapist depending on your needs.

While you are in hospital there will be a number of treatments/tests that may include:

- xrays, CT scans or MRI
- blood tests
- one or more operations
- medications to help manage pain, infections and to prevent complications.



*Associate Professor
Rodney Judson
Director of Trauma*



Having surgery or an operation?

Sometimes, an operation will be required to repair your injuries. Your doctor will discuss this with you and ask you to sign a consent form before going for your operation.

Your doctor or nurse will advise you that you can't have anything to eat or drink before your operation. If you do eat or drink during this time your operation may be delayed or cancelled.

Your doctor or nurse will be able to give you an estimated day and time of your operation; however, this may be postponed or cancelled due to other patients requiring urgent lifesaving surgery. We will always try to prevent this from occurring but this is something that cannot be planned for.

Pain management

Managing your pain with medication is very important. You will be asked by your nurse to rate your pain from 1 (no pain)-10 (worst pain). This will help them decide which medicine is best for you and how much you need. You may require several different types of pain medication which can be given by injection or as a tablet. Your doctor, nurse or pharmacist can give you some more information about how these medications work. If your pain is not well controlled, the Trauma Service may refer you to the doctors and nurses who specialise in pain management (Acute Pain Service) for further assistance. While our aim is for you not to have any pain – at times this can be very challenging due to the complex nature of some injuries.

Prevention of blood clots

Being in hospital with traumatic injuries increases your risk of developing blood clots. This risk is further increased when you are required to rest in bed or not walk around as you normally would.

To minimise your risk of developing a blood clot, you may be asked to:

- Wear foot pumps or calf compressors (*These are a small sleeve that fit over your foot or lower leg and mimicks the action of the blood flow when you are walking. This keeps the blood flowing in your legs and assists with preventing blood clots*)
- Wear compression stockings
- Have blood thinning medication injections once or twice a day into your abdomen
- Sit out of bed or move around if able
- Do exercises in bed if you are unable to sit out

It is important that whilst you are immobile, you keep your stockings and foot pumps/ calf compressors on as much of the day and night as possible.

Prevention of infection

Preventing infection whilst you are in hospital is very important. You can assist with this by:

- Washing your hands before and after eating
- Washing your hands after using the toilet
- Washing your hands after using tissues when coughing or sneezing
- Not touching your operation wounds and dressings

It is also the responsibility of all health professionals to prevent the spread of infection, and hand hygiene should be maintained as a priority. Please feel free to ask those caring for you if they have washed their hands before attending to you.

Personal Hygiene

Your injuries may not allow you to get out of bed or you may require some assistance in the bathroom to use the toilet and/or shower. We encourage all patients to participate as much as possible with their hygiene needs and the nursing staff will assist you with washing, cleaning your teeth, shaving as frequently as you would like and will work with you to ensure you are feeling clean and fresh.

Discharge Process

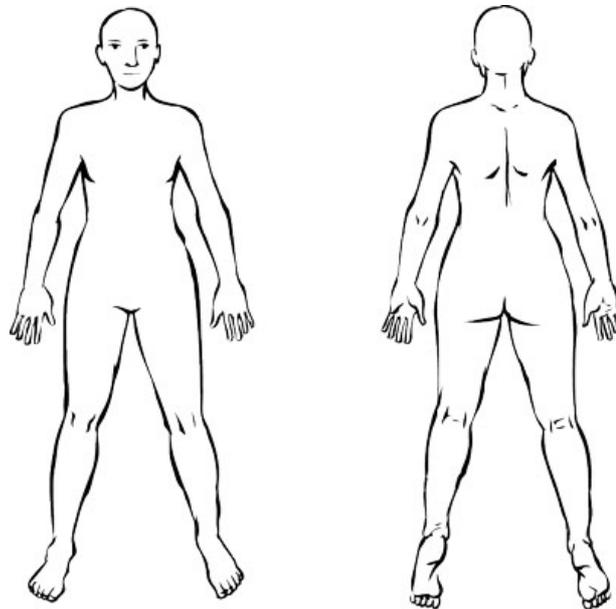
Discussions about your discharge from hospital will occur when we are ready to start planning the next phase of your care. All appropriate destinations for discharge will be explored. The decision will be made considering your ongoing health needs, social circumstances and level of insurance eg. TAC/ Private or Workcover. All possible options will be discussed with you; some people may go home with or without support while others may require rehabilitation as an inpatient.

If you require any medical certificates please ask the doctors to complete these prior to discharge. On discharge all patients will receive:

- A summary of your injuries and treatment for your local doctor
- Medications which will be given to you by the pharmacist
- Any outpatient appointments to see the doctors once you are discharged

If you have any questions about your care, you or your family should speak to the nurse looking after you or a member of the trauma team who will be always happy to help.

Your injuries



Contact

Trauma Service
Phone: 9342 7000

Patient notes

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