

NATIONAL BURN CENTRE



Patient & Family Information Booklet



KIA ORA, WELCOME TO THE NATIONAL BURN CENTRE

We recognise that being in the hospital is stressful; this booklet is designed to answer some of your initial questions.

THE NATIONAL BURN CENTRE (NBC) is a 10 bedded unit for the coordinated care of patients with burn injuries. The unit has facilities for newly injured patients, through to those who are having ongoing follow up care. We act as a national centre for more complex burn injured patients and also as a regional unit for burn injured patients from Auckland and Northland. We have the facilities for both adults and children. However, Middlemore does have a specialised children's hospital that can accommodate and care for burn injured children and once out of the initial phases of treatment children may be transferred over to Kidz First for their ongoing management.





FROM: NORTH of Auckland

Enter Southern Motorway/SH 1

Exit at Mount Wellington Highway and continue for 2.1 kilometres Continue onto Atkinson Avenue for 1.1 kilometres Take the second turn onto Great South Road for 0.5 kilometres Turn slight right onto Piki Thompson Way and continue for 0.2 kilometres Turn right onto Mangere Road and continue for 1.1 kilometres Turn left onto Hospital Road and continue for 0.1 kilometres

FROM: SOUTH of Auckland

Approach via Southern Motorway SH1

Exit SH1 at Manukau turning onto Water Street for 0.2 kilometres Take the third left onto High Street and continue for 0.7 kilometres Take the second left onto Great South Road and continue for 0.5 kilometres Turn slight right onto Piki Thompson Way and continue for 0.2 kilometres Turn right onto Mangere Road and continue for 1.1 kilometres Turn left onto Hospital Road and continue for 0.1 kilometres



Parking and disabled parking is available at Middlemore. We ask that you do not park in the ambulance parking bay directly in front of emergency care. Please keep your car locked and do not leave any valuables in your car. There is a security guard on site, however Middlemore is not responsible for stolen or lost property. Parking is not free and there are charges for various time scales. If you are

having financial issues with parking please seek the advice of one of the staff to assist you.

WELCOME

To ensure that rehabilitation is maximised, that the NBC runs smoothly, and the environment is safe and secure, please read the following information.

ACCESS TO UNIT



TO UNIT The NBC is in the main hospital building on the first floor and signposted well. On entering the building follow the signs for the NBC. There is only one main entrance to the unit this allows access to the inpatients, visitors and outpatients. It is a locked entrance with swipe card access for staff. Visitors and patients must use the wall intercom. You will be asked to verify your identity and reason for entrance. The ward staff can

view you via the wall mounted camera housed with the intercom button.

VISITING

We are aware that visits from family and friends have an important part to play in your rehabilitation. However, sometimes a patient's condition or rehabilitation programme may restrict visiting times. Two visitors at visiting time are welcome at the NBC – please respect the privacy of other patients.



Note: Visiting Hours 2:00 pm – 8:00 pm Daily

If the patient is in isolation visitors will be asked to wear a gown and gloves for protection before entering the room. During your stay in the NBC you may begin in a single room, but as you progress and improve you may be relocated to a double room to aid your rehabilitation.

If the patient is having cares or rehabilitation exercises performed, visitors may be asked to wait until this has been completed. Please ensure that children under the age of 14 are supervised by an adult at all times. Please also be aware that the appearance of burns and the medical environment can be disturbing for young children. For the parents or main caregiver of a paediatric patient, visiting is unrestricted and a parent or main caregiver can be accommodated to stay with the patient.



Important: Strictly <u>NO</u> fresh flowers or potted plants are allowed into the unit as the pollen, water and soil are potential sources of infections. To avoid disappointment please advise your visitors that these items will not be allowed.

MEAL TIMES

Are generally:	Breakfast	08.00am – 08.30am
	Lunch	12.15pm – 12.45pm
	Dinner	5.15pm – 5.45pm

We encourage patients to eat meals in the patient recreation room if they are able and their condition allows.

Families are welcome to provide meals for the patient but please be aware that a balanced healthy diet contributes to your recovery and is strongly encouraged. Special diets can be catered for – please ask staff.

Cups of tea, coffee and milo will be offered prior to, or after, meals.

If you are the parent or main caregiver of a paediatric patient, meals will be provided for you if you are staying in the NBC all of the time.

Visitors can purchase meals and drinks from one of the two cafes within the hospital.

TELEPHONE & FAX



Patients may make short, local phone calls using the ward phone.

Each patient room has a telephone for incoming calls only which the receptionist directs to the appropriate room.

Cell phones may be used – top up cards may be purchased from the shop in the main entrance area. Please be aware to take care with cell phones as they can get lost in bed linen when it is changed.

Hospital phone: 09 276 0000

National Burn Centre Extension: 8214

MAIL

Mail is delivered to the ward daily during the week. Outward mail can be posted, but must be stamped. Stamps may be purchased from the shop at the main entrance. The postal address is:



The National Burn Centre Counties Manukau District Health Board Middlemore Hospital Private Bag 93311 AUCKLAND 2025

NEWSPAPER



A daily newspaper (Monday to Friday) can be purchased from the shop at the hospital entrance.

TV/RADIO



There is a TV in the patient recreation/dining room and in each patient room. There is also an Xbox in each patient room to aid with entertainment. Please ask ward staff about games and DVDs that we have available for borrowing. Please show consideration to other people regarding noise levels.

VALUABLES



Unfortunately, from time to time, we do have thefts. Please do not bring large sums of money or unnecessary items of value into the NBC. We have a policy in place for staff handling/storage of patient money. Arrangements should be made by patients for access to money and purchase of personal items.

NO RESPONSIBILITY will be taken by the NBC for loss or damage to your personal property.

SMOKING



As smoking damages your health and can significantly delay wound healing, Counties Manukau District Health Board (CMDHB) has adopted a SMOKE FREE policy. This means that smoking is not permitted for patients, their family and Whanau and all staff, within the ward, therapy areas and hospital grounds.

If needed, CMDHB will help you as a patient, through withdrawal with use of nicotine replacement therapy. If you have any further smoking related questions for yourself or a family member please consult with the team to discuss how we may be of assistance. It must be noted that no materials that present a fire hazard will be allowed into the patient areas. These may be left with reception staff and retrieved when needed. These items include matches, cigarette lighters and combustible gases.

DRUG USE



The use or possession of illegal/non prescription drugs is strictly prohibited and is a criminal offence. The police will be informed if this occurs.

The consumption of alcohol within the hospital grounds, including the on site residencies, is strictly prohibited.

LAUNDRY



We do not have laundry facilities available for patients. Please ask family/whanau to tend to your personal laundry needs. If this is not possible, there are laundry facilities available in Papatoetoe and Hunters Corner if needed. If you require directions please ask a member of staff. Hospital gowns are laundered by the hospital laundry service.

ON-SITE MOTELS



<u>The Whare – Maori Health Unit</u> (Emergency Accommodation)

Ext 8955 (guests), ext 8138 (reception), 021 634 972 (on-call Whanau support worker)

- Emergency accommodation (EA) is available to persons of all ethnicities.
- Persons being accommodated must be related to an in-patient at Middlemore.
- EA is only available to family members who live too far away to travel on a daily basis (out of town).
- Only two family members of the patient may be accommodated.
- EA is restricted to seven days per family member.
- No children under the age of 14 years will be accommodated (safety reasons).
- EA is on a communal basis and family members should be informed of this.
- The EA is able to accommodate a maximum of eight people at any given time.
- A driver's licence (refundable) amount of \$40 is necessary as a 'key bond'.
- There is no payment for this accommodation; however a koha will be appreciated.
- Arrangements for access to EA are via the centre's Whanau support worker.

Other local motels

Middlemore Motel 133 Mangere Road Otahuhu 09 276 3827 0800 276 382 \$65-\$80 per night

Airport Travel Air Motor Inn

15 McKenzie Road Mangere 09 275 9039 0800 800 799 \$79-\$125 per night

Airport Manor Inn

250 Kirkbride Road Mangere 09 275 0164 0508 54 56 58 \$89-\$99 per night Airport Lodge Motel 296 Kirkbride Road Mangere 09 256 2829 0800 256 2830 \$80-\$120 per night

540 On Great South

540 Great South Road Mangere 09 276 2249 0800 540 111 \$120-\$165 per night

The Grange Lodge

Cnr Grange & Great South Rd Papatoetoe 09 277 8280 \$85-\$170 per night

Please note prices may vary.

TRANSPORT & ACCOMMODATION COSTS

If you travel a long distance to the hospital, or travel frequently to appointments, you may be eligible to receive financial help from The National Travel Assistance Scheme. This can also incorporate some accommodation funding.

Please speak to the Social Worker who will provide you with a leaflet guide to find out if you are eligible and may then help you with your application.

This application has to be supported by your consultant and there is a process to follow to apply.

You may also like to talk with your ACC case manager regarding transport costs if you are a patient.

MODEL OF CARE

A TEAM APPROACH

Burn care requires a team approach that includes you and your family. People working in the hospital are experts in their special fields and we recognise that each patient and family also bring their own expertise and knowledge about their heath and health needs. Your family are very important in providing emotional support and encouragement. Both you and your family are regarded as key members of the team.

Each Thursday the clinical team meet to discuss your progress, and to set goals for the following week. If you have questions about your treatment it is good to ask the team to discuss them at these meetings. Prior to your discharge a full team meeting may be organised which you and your family will be asked to attend. This is to plan your discharge and follow up care.

TEAM MEMBERS



On your admission you will meet many staff. They each have a role to play in your recovery. An assessment will be completed by each member of the team to identify your individual needs. The staff you may meet include:

- Doctors Surgical Consultant, Registrar & House Surgeon:
 Responsible for your surgical and medical care.
- **§ Adult Burns Clinical Nurse Specialist:** Coordinates your care while in hospital and runs the outpatient follow up clinics.
- § Paediatric Burn Care Nurse Specialist: Coordinates outpatient clinics and provide outpatient wound-care/follow up in some cases. May be involved in some inpatient care.
- § Nursing staff Charge Nurse, Clinical Nurse Educator, Registered Nurses, Enrolled Nurses, Health Care Assistants: Responsible for your day-to-day personal and medical care and education. Our nurses have a lot of experience in burn care and will be able to help you understand your treatment.
- § Physiotherapist and Physiotherapist's assistant: Physiotherapy involves exercises to help stretch and improve joint movement, strengthen muscles and improve general fitness and function. This is important following burn injury as the skin tends to tighten as it heals and can restrict movement. Your physiotherapist will assess you and work on an exercise programme with you. You may also be seen by a physiotherapy assistant to help with exercises and have an independent exercise programme to work on by yourself. If you have any breathing difficulties as a result of your burn injury your physiotherapist may work with you on breathing exercises and other techniques to help with this.
- § Occupational Therapist and Occupational Therapist's assistant: Makes splints required for immobilising or positioning joints. They will assess functional abilities and equipment requirements. They will assess support needs for your return home.

They are also involved in long term scar management and the prevention of contractures.

- § Dietitians: People with major burn injuries require more energy to heal and will need to eat more, and have a good diet including lots of protein and vitamins. The dieticians understand the food and drink which will help your body heal. They will discuss this with you.
- § Play Specialist: Hospital Play Specialists work as a member of the healthcare team, with the primary aim of maintaining children's development, emotional wellbeing, and ability to master and cope with illness, hospitalisation and treatments for children and young people with a burn injury.
- § Social worker: Will offer support for you and your family (including any children), help with practical concerns, benefits, financial issues, lifestyle changes and supportive counselling while in hospital. They are also involved in the planning of your discharge from hospital.
- **§ Psychologist or Psychiatrist:** Provides assessment and support for existing psychiatric conditions or for psychological distress as a consequence of the injury.
- § Clinical Pharmacist: Coordinates and rationalises ongoing medication management.
- **§ Ward Clerk:** Organises the paperwork involved in your admission and discharge, is available to answer questions and directs phone calls to you.
- § School teachers: Available to paediatric long term inpatients for meeting educational needs.

Other members on referral

- § Interpreting Services: If patients and/or families require this service, it can be arranged.
- § Cultural Support: For Maori and Pacific Island patients, representatives from the Cultural Resource Unit visit the Centre regularly and are available to you and your family/Whanau as required.
- **§** Chaplain/Spiritual Leaders: Can be made available if requested.

External members of the team

§ ACC Case Manager: Assigned to support you with funding your services and equipment and may be involved in discharge planning. Often your case manager may visit you in hospital.

REHABILITATION

Rehabilitation is not just exercise, but is a process that covers all aspects of learning to care for yourself and maximise your quality of life.

Your Responsibilities:

- **s** You are expected to participate in all aspects of your rehabilitation while at the NBC.
- **s** It is important to follow medical advice including bed rest and medications.

Your individual rehabilitation programme will consist of a range of therapy options which will be incorporated into a daily routine. These will include such areas as skin care, mobility, strengthening exercises and daily living skills. We will also consider with you options for returning to employment and/or learning new skills. We may involve other agencies to assist and support you with this.

If you require grafting for your burn we will ask you to limit movement while it is healing. During this time you will probably need to wear splints to keep your limbs in the best position for healing and recovery. If the graft is on a child, care must be taken in moving or picking up the child. The nurses will talk to you about this.

Once grafts are healed and it is safe for you to move, we will ask you to begin exercises under the direction of the physiotherapist and surgeons.

Rehabilitation may continue long after discharge from hospital. You may be expected to attend outpatient appointments to monitor progress. If you think you are going to have difficulties with transport please talk with your nurse before you are discharged.

It is important to realise that rehabilitation is a team effort with you and your family at the NBC. You need to be fully involved in all aspects of your programme so that your goals are achieved. The team will provide you with the professional support and encouragement to do this.

QUESTIONS OFTEN ASKED BY BURN PATIENTS AND THEIR FAMILIES

WILL I BE IN PAIN?

Staff will regularly assess your pain with you. Pain medications are given to help relieve the pain. Sometimes medication will take all of the pain away and sometimes it will not; it depends on the individual and situation. There are limits set as to how much medication can be given and how frequently. Please be assured that staff will do everything possible to ensure your comfort and relief from pain.

Most of the pain or discomfort will occur during dressing changes or wound care and physiotherapy. There will be a medication plan to minimise this discomfort. Distraction during this time can help with pain relief. Play specialists work with children to help distract them and to teach parents techniques that can help their child.

Talk to your nurse or other team members about ways to help manage wound care in more comfort.

WILL I HAVE SCARS?

It is hard to answer this question as scarring depends on the depth of the wound, healing time, complications and treatment. The team caring for you understand the need to know about scarring and will discuss the issue with you. It may be many months before it is evident how much scarring there will be. Conservative scar management treatment will be recommended when there are no concerns that there will be scarring. Your occupational therapist will discuss appropriate options with you.

There are specialist members of the team that will help you with scar management should it become an issue.

WHAT DO I DO ABOUT FEELINGS?

You probably have many different feelings relating to the burn injury and the changes it has caused to your life. These feelings may change from day to day and often include feelings of anger, guilt, sadness, helplessness, frustration and even hopelessness.

Sometimes people say things they would normally not say, or find it difficult to engage in rehabilitation on some days. It is important to know that other patients and families experience these feelings; they are very normal.

If you want to talk about your feelings, the ward staff, clinical psychologist and social worker are available. The burn support group are also available to offer support on request (please see page 15).

WHAT ABOUT MY FINANCES?

Hospital admissions can cause a great deal of financial distress. It may be that you are covered by ACC for your treatment. If so, a case manager will be assigned to you who will inform you of all your entitlements with ACC and relevant contact numbers.

The Social Worker may be able to provide advice and assistance with benefits and some other financial concerns.

If you are worried about your finances please ask to speak to the Social Worker for advice.

INFECTION CONTROL: WHAT IS IT?

Infection control is a very important part of our patient care. It includes hand washing, gowns, gloves and use of sterile processes and equipment. This also includes the meticulous cleaning of children's toys. We discourage the sharing of toys for the protection of our vulnerable children and their siblings. Infections are a big risk for people with burns and we improve their healing and outcomes if we can prevent infections.

WHAT SHOULD I DO?

All visitors are asked to clean their hands with the sterilising gel or to wash hands as they enter the NBC.

When the patient is in isolation, all visitors and staff are required to put on gown and gloves every time they go into a patient's room and discard them before they leave. A staff member will guide you on how to do this. Once you are able to leave your room you may be asked to wear a gown when you are outside the room or NBC.

OPERATING LISTS

There are two operating lists you may be placed on depending on the day, and the extent and type of your burns or surgery requirements.

The Acute Operating List - This is an urgent operating list that runs every day and is prioritised in terms of safety, with life threatening operations happening first. If you are on this list we are unable to tell you exactly when you may have your operation and it is possible that circumstances beyond our control (e.g. severe road traffic accident) may mean that some operations have to be cancelled for that day.

Burns Operating List - This operating list is a pre-planned operating schedule for surgery. Surgery times can sometimes be unpredictable and cause some change in schedule.

Occasionally you may be transferred form one operating list to another and this may alter the time of your surgery. Should this occur, your nurse will inform you of any changes.

If you are scheduled to have surgery you will be asked not to eat and drink for a number of hours prior to theatre. It is very important that you follow this advice to minimise the risks of problems with your anaesthetic. Those patients receiving special feeds via a tube may not need to fast for surgery; your nurse will inform you when to stop eating and drinking in preparation for your surgery.

We will endeavour to keep you well informed about how the list is progressing. However, we stress that we are unable to give any precise times for theatre.

MEDICAL TERMS

If the staff use terms that you do not understand, please ask them to explain. Your nurses will be able to talk with you about your treatment and are pleased to answer questions.

BURN DEPTH

A superficial burn affects the top layer of skin. The skin is red and will hurt when you touch it. Healing takes approximately seven days and usually heals without scarring.

A partial thickness or mid dermal burn affects the top and middle layers of skin. The skin often has blisters. It may look pink or red. It is often painful to touch. Healing may take 10 days to three weeks. Scarring may occur with burns that take longer to heal.

A deep dermal or full thickness burn usually involves all three layers of skin. The skin will be very white, brown, or black, and can look like leather. This type of burn generally requires a skin graft. Some scarring will occur and scar management will be recommended.

Name	Definition	
Intravenous lines (IV)	A way of giving special fluids or medicines through a vein.	
Nasogastric tube (NG) or tube feeding	A tube inserted through the nose into the stomach to provide nutrition.	
Eschar	Dead tissue covering a burn area.	
Swelling (Oedema)	Fluid gathers in the tissue after a burn injury causing swelling and stiffness. Sometimes fluids leak onto dressings or the bed.	
Debridement	Removal of dead skin destroyed by the burn injury.	
Skin graft	A thin layer of the person's own skin is taken from an unburned area and placed on a burned area.	
Donor site	The area of the body from which skin is taken for grafts.	
Splint	A device to help prevent contractures, provide physical support, and maintain proper positioning.	
Contracture	Scar tissue across a joint can shrink and make it hard to bend or move the joint fully.	
Hypertrophic scars	Enlargement or overgrowth of scar tissue.	
Repigmentation	Recolouration of the skin post injury.	

DISCHARGE

If you have been in the NBC for a long stay, or if you have complex needs, a Discharge Planning Meeting may be held before you go. This involves team members getting together with you and your family to talk about what will happen after you leave the NBC. It allows us to organise what is needed before you go, and this makes it easier for you. If you have any concerns about your discharge plan, speak to a staff member.

If you have had a long admission you may be encouraged to experiment with having time away from the hospital prior to discharge. This helps you to identify any difficulties you may have on returning home, and gets you used to being away from the hospital. Leave must be approved by the surgeons and team before you go. You may take day leave for a few hours, or try overnight leave. Before you have time away from the NBC the staff will organise medications and any equipment you may require. Your nurse will tell you when you need to be back so that you do not miss out on any important rehabilitation.

It is important that you come back on time.

On discharge from the NBC you will receive a discharge summary (an overall outline of your stay at the NBC). A copy will be given to you, your G.P and any other relevant health professional. On the morning of your discharge you may need to be seen by several members of the team including the nurse, physiotherapist and occupational therapist. They may each need to arrange outpatient appointments for you.

On your discharge you should collect:

- **S** Discharge information
- S Any of your medications that are left over
- **s** Any personal items you have locked away for safety
- s Any physio/occupational therapy equipment you require
- s Prescription for any medication you may need
- s ACC paperwork
- S Doctor's certificate if you need one
- S Information on dressings for District Nurse visits
- **s** Follow up appointments

If you think you will be unable to attend your outpatient appointments please discuss this with your nurse before you go home. You will be expected to attend outpatient appointments even after your burn injury has healed. It is important that we are provided with a current telephone number in case of any changes to your appointments.

If you are being followed up at the NBC you may be given a number of appointments to see various team members. It is important that all appointments are kept, to aid in your recovery and rehabilitation.

Please ask any questions if you do not know what will happen or are unsure about your discharge.

OUTPATIENT SERVICE

When you leave hospital you may have ongoing care needs this means you may be seen by a number of professionals:

District Nurse – Will assist you to manage your ongoing needs at home and dressings. We may ask you to attend a dressing clinic at the NBC to review your wounds.

Burns Clinical Nurse Specialist – You may see the CNS for check-up and review of your ongoing care/dressings. At this appointment you may also see the doctor, occupational therapist, physiotherapist and/or clinical psychologist to assess your progress. This may be repeated at specified intervals thereafter, depending on your needs.

You may also have additional appointments booked to see just one of these health professionals if more time is required (e.g. physiotherapy).

Regional Burn Unit or Local Hospital - If you live out of the Auckland area you may be asked to return to a Regional Burn Unit or local hospital depending on your needs.

Physio and OT - You may be given individual appointments to see the physio or OT for treatment.

It is important that you provide a current telephone number in case there are any changes to these appointments. It is also important to notify us if you are unable to attend so that we may arrange further follow up for you.

COMPLAINTS



If you are unhappy about any part of the service or care you are or have been receiving, please contact the Charge Nurse. You can make a direct complaint or discuss the issue with the Charge Nurse. This action will in no way have an adverse effect on the way you are treated. If you wish to take your complaint to a totally independent source, please feel free to contact the Health Advocates Trust on (09) 623-5799.

HEALTH & DISABILITY ADVOCATE

A Health and Disability Advocate is available to advise you on your rights as a patient. The Health and Disability Advocate is not employed by Counties Manukau DHB, and all communications are in confidence. The Health and Disability Commissioner Health Advocates Trust can be reached on Auckland (09) 373-1060 or (09) 623-5799.

THE CODE OF HEALTH AND DISABILITY SERVICES CONSUMERS' RIGHTS

- 1) **RESPECT** You should always be treated with respect. This includes respect for your culture, values and beliefs, as well as your right to personal privacy.
- 2) **FAIR TREATMENTS** No-one should discriminate against you, pressure you into something you do not want or take advantage in any way.
- 3) **DIGNITY AND INDEPENDENCE** Services should support you to live a dignified, independent life.
- 4) **PROPER STANDARDS** You have the right to be treated with care and skill, and to receive services that reflect your needs. All those involved in your care should work together for you.
- 5) COMMUNICATION You have the right to be listened to, understood and receive information in whatever way you need. When it is necessary and practicable an interpreter should be available.
- 6) **INFORMATION** You have the right to have your condition explained and be told what your choices are. This includes how long you may have to wait, an estimate of any costs and likely benefits, and side effects. You can ask any questions to help you be fully informed.
- 7) IT'S YOUR DECISION It is up to you to decide. You can say no or change your mind at any time.
- 8) **SUPPORT** You have the right to have someone with you to give you support in most circumstances.
- 9) **TEACHING AND RESEARCH** All these rights also apply when taking part in teaching and research.
- 10) COMPLAINTS It is okay to complain; your complaints help improve service. It must be easy for you to make a complaint and it should not have an adverse effect on the way you are treated.

This is an outline of the rights guaranteed by the law know as the CODE OF HEALTH AND DISABILITY SERVICE CONSUMER'S RIGHTS. They apply to all health or disability services, whether you pay for them or not. A full copy of the Code of Rights is available from your provider, the Health and Disability Commissioner or Bennett's Government Bookshop. If you need help ask the person or organisation providing service.

BURN SUPPORT GROUP

Burn Support is a voluntary support group consisting of burn survivors and their families. We offer emotional and practical support to families going through the trauma of a burn during their stay in hospital and after discharge.

Other services we offer are:

- **S** Practical help for 'out of town families', e.g. food parcels, transport, taxi/petrol vouchers, phone cards
- **s** Outings and activities provided for children and teenagers
- s Annual camps
- s Peer support
- s Family group meetings
- **s** Workshops run by professionals
- s Re-entry programmes into schools and workforce
- **s** Burn awareness and prevention talks
- s Newsletters
- **s** Donate equipment and services to the hospital

The Burn Support office is located in the old cardiac corridor near the parking offices and social workers at Middlemore Hospital.

Our office hours are 9.30am - 2.30 pm Monday to Friday.

We have an answerphone service and an emergency contact number 24 hours a day:

- s Tel: 09 276 0250 (external) ext 8250 and 8861 (internal)
- S Email: <u>auckburn@ihug.co.nz</u>
- **s** After hours phone number: Vera Steenson 09 525 0631

FURTHER INFORMATION ABOUT BURN INJURIES

We recognise your need for information and welcome your questions. If you are trying to understand more about your treatment and recovery you may want to also look at the internet. But please be aware that information on the internet varies in quality and credibility. If you need help understanding this, please ask a member of staff to assist you.