

# PATIENT SURGERY GUIDE





missourieyesurgerycenters.com





The Surgery & Laser Centers of Missouri Eye Institute are free standing Ambulatory Surgery Centers conveniently located to serve patients at three locations in Southwest Missouri. The centers are licensed by the state of Missouri and certified by the Centers of Medicare and Medicaid Services (CMS). They have been designed with patients' comfort and convenience in mind and are furnished with state-of-the-art equipment and cutting-edge technology. The regions only Laser Assisted Cataract equipment can be found at the Surgery & Laser Centers of Missouri Eye Institute.

The staff are well-trained professionals who are ready to provide your eye surgery in the most convenient and timely manner and in the least intimidating environment possible. The Surgery Centers are also economically efficient, providing the same services as the hospitals at a much lower co-pay, coinsurance, and deductible required from the patient. The facilities are owned and/or utilized by the following organizations and their affiliates.



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# PREPARING FOR SURGERY

# PRE-ADMISSION PHONE CALL AND NURSE ASSESSMENT

You will receive a phone call from a nurse one week prior to your scheduled procedure to gather information in advance of your surgery. The nurse will ask health history questions and review instructions with you for your upcoming surgery. Please have a current list of all your medications and dosages available for this phone call, as well as any over the counter medications, herbals or vitamins.

#### **MEDICATIONS**

During the Pre-Admission phone call, the nurse will inform you of medications to take the morning of your surgery.

Patient taking aspirin, anti-inflammatory medications (ibuprofen, Motrin, naproxen, etc.), herbals or weight loss medications will be reviewed during Pre-Admission phone call.

If you take Coumadin or other blood-thinning medications, instructions will be given during Pre-Admission phone call.

## PRE-ADMISSION TESTS

Your surgeon or anesthetist may want you to have clearance from your primary care physician or specialist before your surgery. Specific testing, including lab tests, may be needed prior to your surgery. Please complete all testing at least one week before your scheduled procedure so we have complete information on the day you arrive for surgery.

## **SURGICAL ARRIVAL TIME**

A staff member will contact you one week before your surgery to confirm your arrival time.

## **ADVANCE DIRECTIVE**

If you have an Advance Directives, bring a copy and share the document with the staff at the surgery center. Please notify the front desk staff of this document.

#### THE DAY OF SURGERY

You will be receiving sedation for your surgery. You will be required to have someone accompany you the day of the procedure. They will need to check in with you and remain at the surgery center until you are discharged.

#### DO NOT

Eat or drink anything after midnight the evening before surgery. (This includes water, food, gum, candy, antacids of any type, alcohol or tobacco products). Failure to follow these instructions could lead to cancellation or postponement of your surgery.

Teeth may be brushed, but DO NOT swallow water.

Please leave all valuables at home (wallets, purses, money, ALL JEWELRY — including wedding bands, engagement rings and all body jewelry or piercings).

Please DO NOT wear make-up, eyeliner, mascara, false eyelashes, or foundation the day of surgery.

You may want to bring a pillow for your comfort during the ride home.

Additional Items to Bring

- Current insurance card(s) and driver's license.
- · Copy of Advance Directives (if available).





# **AFTER SURGERY**

The surgical nursing staff will review your discharge instructions with you during your stay. You will also receive a copy of these instructions to take home.

For the public's safety as well as your own, The Surgery Center requires you to have someone drive you home after surgery unless your surgeon or the nursing staff have informed you otherwise. Some procedures, anesthesia and medications may impair your ability to drive safely for a period of time following surgery. If you do not have a ride as instructed, your procedure will be cancelled.

Avoid alcoholic beverages for at least 24 hours after surgery or if you are taking prescription pain medication.

You will receive sedation or general anesthesia and will need to rest at home for 12-24 hours and avoid strenuous activities (driving a motorized vehicle, operating machinery, participating in sports) or activities that require mental alertness and/or coordination. A responsible adult is to remain with you for 12-24 hours after you leave the center.

## **BILLING AND INSURANCE INFORMATION**

The Surgery Centers of Missouri Eye Institute participate with most insurance companies and will bill the insurance that we have on file for services rendered. If you have questions or concerns regarding your account, please contact the billing department at 800-383-3831.

The surgery center accepts the following forms of payment: cash, Visa, MasterCard, debit cards and personal checks. We ask that personal checks be presented at least 7 days prior to surgery date.

You will receive three bills for your surgical procedure. The surgeon, anesthesia, and the surgery center.

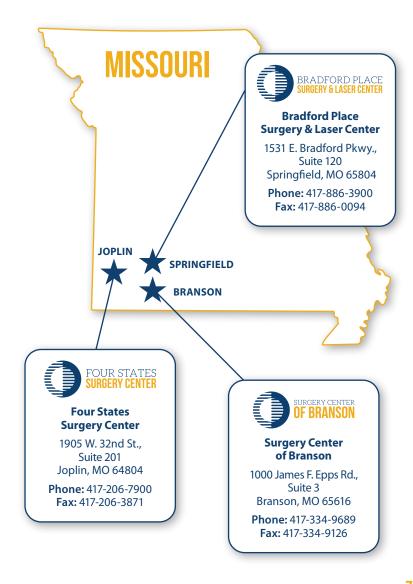


# **MEI LOCATIONS**

The Surgery & Laser Centers of Missouri Eye Institute are here to help you see more clearly.

For over thirty years, the Ophthalmologist at Missouri Eye Institute have been caring for your eye health with a mission to assist patients with living their lives to the fullest through better vision. With convenient locations across Southwest Missouri and the highest quality cutting-edge technology, we are here to take care of you.

Contact us to schedule a consultation and take a step toward better vision.





# **PATIENTS RIGHTS**

We want you to know what your rights are as a patient, as well the obligations of this surgical center, its staff and the physicians. We encourage you to talk openly with those involved in your care.

- Patients are treated with respect, consideration and dignity. Patients are provided appropriate privacy.
- Patient disclosures and records are treated confidentially, and patients are given the opportunity to approve or refuse their release, except when release is required by law.
- Patients are provided, to the degree known, complete information concerning their diagnosis, evaluation, treatment and prognosis. When it is medically inadvisable to give such information to a patient, the information is provided to a person designated by the patient or to a legally authorized person.
- Patients adjudged incompetent under applicable State laws by a court of proper
  jurisdiction, the rights of the patient are exercised by the person appointed under State law
  to act on the patient's behalf. If a State court has not adjudged a patient incompetent, any
  legal representative or surrogate designated by the patient in accordance with State law
  may exercise the patient's rights to the extent allowed by State law.
- Patients are given the opportunity to participate in decisions involving their health care, except when such participation is contraindicated for medical reasons.
- Patients have the right to know what their responsibilities are and how they are to conduct themselves as explained under Patient Responsibilities.
- Patients have a right to know what services are available.
- Patients have a right to know what provision(s) are available for after-hours and emergency care.
- Patients have the right to examine and receive an explanation of their bill, regardless of the source of payment.
- Patients have the right to know, in advance, the expected amount of his/her bill, regardless
  of the source of the payment.
- Patients have the right to receive care in a safe setting.
- Patients have the right to know what the payment policies are.
- Patients have the right to know if any experimental research will be done during his / her treatment and have the right to refuse it.

- Patients have the right to information regarding the credentials of health care professionals involved in their care or treatment.
- Patients have the right to be informed of any persons other than routine personnel who will observe in his / her treatment, and to refuse that observation.
- Patients have the right to change their provider if other qualified providers are available.
- Patients have the right to be free from all forms of abuse, harassment, discrimination or reprisal.
- Patients have the right to be fully informed about a treatment or procedure and the
  expected outcome before it is performed.
- Patients have the right to be informed or, as appropriate, the patient's representative of the
  patient's right to make informed decisions regarding the patient's care.
- Patients have the right to refuse treatment and be informed of the consequences of his / her actions.
- Patients have the right to exercise his / her rights without being subjected to discrimination or reprisal.
- Patients have the right to expect quality care and service.
- Patients have the right to voice grievances regarding treatment or care that is (or fails to be) furnished

#### **GRIEVANCES OR COMPLAINTS**

PATIENTS and/or PATIENT REPRESENTATIVES should contact the office of the Medicare Beneficiary Ombudsman at https://www.cms.gov/center/special-topic/ombudsman/medicare-beneficiary-ombudsman-home or the State of Missouri Representation if they have a concern or complaint about the Surgery Center. Anyone may file a complaint against a licensed or certified health care facility or healthcare provider. A complainant may provide his/her name, address, and phone number to the department. Anonymous complaints may be registered. All complaints are confidential.

The Missouri Department of Public Health is the responsible agency for Ambulatory Surgical Centers' complaint investigation. Complaints may be registered with the department by calling 573-751-6400 or faxing 573-751-6010.

Mail written complaints to: Missouri Department of Health P.O. Box 570 Jefferson City, MO 65102-0570

A grievance, complaint, or concern regards to the medical care given can also be filed with the administration staff of the Surgery Center.

ASC Administrative Director 1531 E. Bradford Parkway Springfield, MO 65804 800-383-3831

# **NOTICE OF PRIVACY PRACTICES**

At the Surgery & Laser Centers of Missouri Eye Institute, your privacy is important to us and we comply with HIPAA and patient privacy laws. We DO NOT PERMIT cameras, cellphones, or recording devices of any kind in patient care areas.

The notice describes how health information about you as a patient may be used and disclosed, and how you can get access to your individually identifiable health information.

The complete notice of privacy practices is available on our website, missourieyesurgerycenters.com or upon request.

If you believe your privacy rights have been violated, you have the right to complain to us, or the Secretary of the United States Department of Health and Human Services. http://www.hhs.gov/ocr/hipaa/ or calling 866-627-7748. You will not be retaliated against in any way for filing a complaint with us or the government. Should you have questions, comments, or complaints, you may direct all inquiries to our privacy official.

Questions about this notice should be directed to:

ASC Privacy Officer 1531 E. Bradford Parkway Springfield, MO 65804 800-383-3831

## NON-DISCRIMINATION NOTICE

The Surgery Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The complete non-discrimination notice is available on Missouri Eye Surgery Center's website, missourieyesurgerycenters.com or upon request. If you believe that the Surgical Center has failed to provide these services or discriminated in any way on the basis of race, color, national origin, age, disability, or sex you can file a grievance to:

ASC Compliance Officer 1531 E. Bradford Parkway Springfield, MO 65804 800-383-3831

## PATIENT RESPONSIBILITIES

- It is the PATIENT'S responsibility to read and understand all permits and / or consents to be signed. Patients should ask either the nurse or physician to clarify any information not understood about their care or services.
- It is the PATIENT'S responsibility to provide complete and accurate information to the best of his/her ability about his/her health, any medications, including over- the-counter products and dietary supplements, and any allergies or sensitivities.
- It is the PATIENT'S responsibility to follow the treatment plan prescribed by his/ her
  provider, participate in his/her care and to notify Surgery Center on admission if
  preoperative instructions have not been followed.

- The PATIENT is responsible for his/her actions if they refuse treatment or do not follow preoperative instructions.
- It is the PATIENT'S responsibility to provide reliable adult transportation to and from the Surgery Center, and to arrange for a responsible adult to remain with them for 12-24 hours after they leave the center, appropriate to the medications and/or anesthesia received and according to preoperative instructions given.
- It is the PATIENT'S responsibility to follow the postoperative instructions given by the physician(s) and/or nurses. This includes instructions regarding postoperative appointments.
- It is the PATIENT'S responsibility to contact the physician if any complications occur.
- It is the PATIENT'S responsibility to ensure that all payments for services rendered are made
  on a timely basis. The patient is ultimately responsible for payment, and patient accepts
  personal financial responsibility for any charges not covered by his/her insurance, regardless
  of insurance coverage.
- It is the PATIENT'S responsibility to provide financial and/or insurance information regarding
  who will be responsible for the bill including current address and authorized contact
  information.
- It is the PATIENT'S responsibility and those accompanying the PATIENT to be respectful of all
  health care providers and staff, as well as other patients, and to follow the Surgery Center's
  policies.
- It is the PATIENT'S responsibility to inform his / her provider about any living will, medical
  power of attorney, or other directive(s) that could affect his / her care.
- It is the PATIENT'S responsibility to notify the administration of the Surgical Center if the
  PATIENT or PATIENT REPRESENTATIVE thinks their right(s) have been violated or if the PATIENT
  has a suggestion, comment or complaint.

Suggestions, Comments, or Complaints should be directed to:

ASC Administrative Director 1531 E. Bradford Parkway Springfield, MO 65804 800-383-3831

## ADVANCE DIRECTIVES AND LIVING WILLS

The Surgery Centers will transfer a patient to the nearest hospital in the event of a medical emergency. These hospitals are:

- Cox Medical Center South
- Cox Medical Center Branson
- · Mercy Hospital Joplin or Freeman Hospital West

The hospital upon transfer will make decisions about following the desires set forth in the Advanced Directive or Living Will. If the patient has an Advanced Director or Living Will, a copy of the Advanced Directive is to be supplied to the Surgery Center by the patient to be placed in the medical record. If a patient is transferred emergently to the hospital, a copy of all chart information will be sent with the patient to the hospital, including the Advanced Directive or Living Will.







# Surgery Center of Branson

1000 James F. Epps Rd., Suite 3 Branson, MO 65616

Phone: 417-334-9689 Fax: 417-334-9126





#### Bradford Place Surgery & Laser Center

1531 E. Bradford Pkwy., Suite 120 Springfield, MO 65804

Phone: 417-886-3900 Fax: 417-886-0094





#### Four States Surgery Center

1905 W. 32nd St., Suite 201 Joplin, MO 64804

Phone: 417-206-7900 Fax: 417-206-3871