

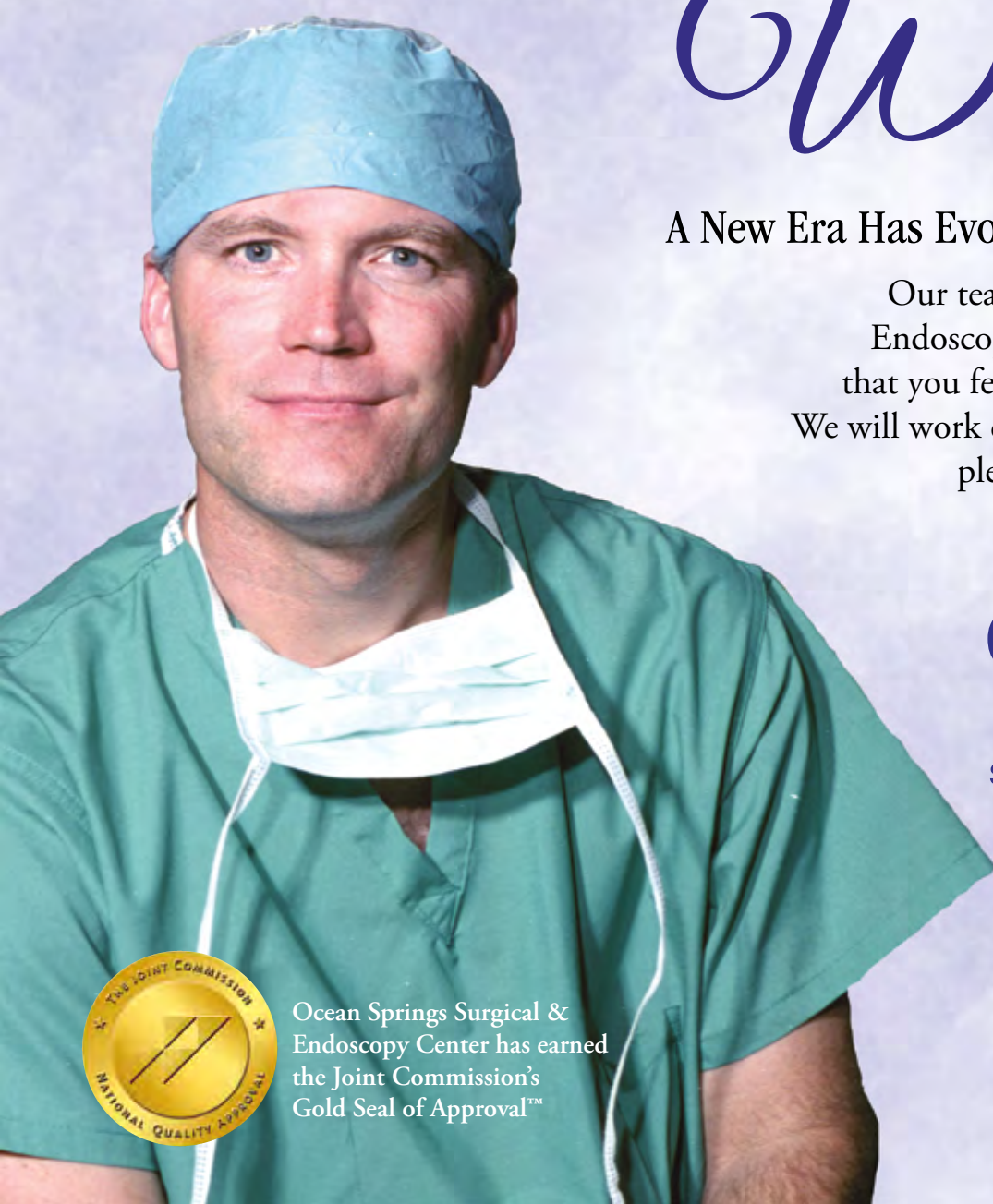
PATIENT GUIDE



Welcome

A New Era Has Evolved for Ambulatory Care

Our team at Ocean Springs Surgical & Endoscopy Center works hard to ensure that you feel at ease while you are with us. We will work closely with you to make this as pleasant an experience as possible.



Ocean.
Springs

Surgical & Endoscopy Center

228-872-8854

3301 Bienville Boulevard
Ocean Springs, Mississippi 39564



Ocean Springs Surgical & Endoscopy Center has earned the Joint Commission's Gold Seal of Approval™

www.OSSurgical.com



Welcome

WELCOME TO OCEAN SPRINGS SURGICAL & ENDOSCOPY CENTER

Thank you for choosing Ocean Springs Surgical & Endoscopy Center for your procedure. Our expert team will work hard to ensure that you feel at ease and comfortable while you are with us. Our goal is to provide you with the best, most effective care so that you can return to your normal activities as quickly as possible. If you have any questions or concerns while you are in our care, we encourage you to ask any member of our team. We will be happy to answer your questions or to assist you.

The information contained in this booklet applies to all patients who are here for surgery, endoscopy, or pain relief procedures. We hope that it is helpful in preparing you for your procedure or treatment. If you have specific questions that are not answered here, please ask your physician, or call the preoperative (Pre-Op) nurse at 228-872-8854.

CONTACT BY OUR NURSE BEFORE YOUR PROCEDURE

If our nurse has not contacted you **by 4 p.m.** the weekday before surgery, please call 228-872-8854.

PHOTO ID AND INSURANCE CARD

Bring your insurance card and a photo identification card such as a driver's license with you the day of your procedure.

CONVENIENT PRE-REGISTRATION

You may visit the surgical center between 8 a.m. and 5 p.m. to pre-register. Bring your insurance card and a photo identification card such as your driver's license.

PREPARATION FOR YOUR PROCEDURE

Do not eat or drink anything after midnight before your procedure, unless you have been given special instructions by your physician or our Pre-Op nurse.

This is extremely important. You could have serious complications if your stomach is not empty during surgery. Please ask your physician or call the Pre-Op nurse at Ocean Springs Surgical & Endoscopy Center if you have questions about eating and drinking before your procedure. Children are scheduled as early in the day as possible. If your child is having surgery, please be sure that he or she does not eat or drink anything after midnight. If your child is an infant, our anesthesiologist may have additional instructions for you.

If you or your child are taking medication for heart problems, high blood pressure, or diabetes, discuss with the Pre-Op nurse the proper instructions about taking the medication on the day of surgery.

If you develop any changes in your health between the Pre-Op visit to your physician and the day of the procedure, notify your physician. Please report even minor changes such as an elevated temperature, cough, or cold. If you suspect that you are pregnant, please notify your physician.

Parents may want to have an additional adult to assist in accompanying a child home.

SECURE A DRIVER BEFORE YOUR SURGERY

IMPORTANT: For your own safety and protection, you will not be allowed to drive a motor vehicle immediately following your procedure. You must have someone here at the facility during the entire duration of your procedure. Verification of the driver will be made prior to any procedure requiring sedation. **Your surgery will be cancelled if you fail to have a responsible driver to take you home.**

EATING BEFORE YOUR PROCEDURE

Unless you receive other instructions from your physician or the Pre-Op nurse, do not eat or drink anything after midnight before your procedure.





DAY OF YOUR PROCEDURE

It is normal to feel anxious or a little nervous before your procedure. Being prepared helps reduce the anxiety. Here is some advice to help you prepare.

Bathe or shower and brush your teeth the morning of your surgery. Do not swallow any water. Nail polish and contact lenses should be removed. Do not use perfumes, colognes, or body lotions.

Wear warm, loose fitting comfortable clothes. Shirts with front buttons or zippers are best. Wear socks to keep your feet warm and sensible shoes to allow safe walking.

Leave valuables at home. There is no safe storage area for these items. Remove all jewelry and body piercing studs before leaving for the center. If your tongue is pierced, remove the stud. In case of an emergency, the stud can be an obstruction for placing lifesaving breathing instruments.

Limit the number of people accompanying you. To maximize the comfort of everyone waiting, we request that only one person come with you.

If you have not pre-registered at the surgical center, be sure to bring your insurance card and a photo identification card such as a driver's license with you the day of your procedure.

Female patients, be prepared to give a urine sample. All female patients who have menstrual periods, regardless of age, will have a urine pregnancy test done prior to beginning any procedure.

In the Pre-Op area you will be asked the name of your physician and to state what procedure you are to have. This is done to help ensure that you have been properly informed. If you are unclear about your procedure, this is the time to ask questions. We will be happy to ask your physician to speak to you.

Before anything else is done a member of our Pre-Op team will ask you to sign two consent forms. One gives the Ocean Springs Surgical & Endoscopy Center your permission to perform the procedure and the other is to allow the anesthesia team to care for you during the procedure.

AFTER YOUR PROCEDURE

Following your procedure, you will be moved to our fully equipped recovery area. There, you will be closely monitored by our anesthesia and nursing team. The length of stay varies, and many patients are discharged within 30 minutes after their procedure.

We will bring one designated family member to the PACU (recovery room) when you are stable.

ANOTHER DRIVER IS NECESSARY

Your surgery will be cancelled if you fail to have a responsible driver to take you home.

CONTACTING YOUR PHYSICIAN

If you have questions after your procedure, please contact your physician through his or her office.



IN CASE OF EMERGENCY

If you have an emergency, please contact the nearest hospital emergency department or call 911 for assistance.



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Have your prescriptions filled before your procedure so when you return home, you will have the medication available when you need it.



AFTER YOU RETURN HOME

Your recovery room nurse will provide you with post-procedure instructions regarding diet, rest and medication. Plan to have someone stay with you for at least 12 hours following your procedure, and pamper yourself during this time.

Since it is normal to feel drowsy after receiving anesthetic medication, we also recommend that you postpone the following activities for 24 hours after your procedure:

- Driving and operating equipment
- Signing important papers
- Making significant decisions
- Drinking alcoholic beverages



SOME HELPFUL SUGGESTIONS

If your physician has given you a prescription, have it filled before your procedure. Then, after you return home, you will have the medication available when you need it.

It is not unusual to forget small details, so write down any questions you may have and bring them with you. We will be happy to provide you with appropriate information.

It is a good idea to have someone stay with you for the first 12 hours after you return home. Rest and pamper yourself during this time.

Finances

FINANCIAL ARRANGEMENTS

Our business office team will be glad to submit the claim to your insurance company or Medicare for Ocean Springs Surgical & Endoscopy Center charges. Standard outpatient procedures are usually covered by your medical insurance or Medicare. You will receive separate bills from the Ocean Springs Surgical & Endoscopy Center and your physician. You may also receive separate bills from the anesthesiologist, the CRNA provider, laboratory, pathology or radiology.

Depending on your coverage, you may be asked for partial payment upon admission to the Center. We make every effort to inform you of this amount prior to your admission. When you arrive for surgery, you should be prepared to pay all co-payments and your deductible if it has not been met.

For your convenience we accept VISA, Master Card and Discover credit cards. We also accept cash, cashier's checks and money orders.

If we need additional insurance information, or if you need to make a payment at the time of your surgery, one of our business office team members will contact you prior to your procedure. He or she will collect necessary insurance information to assist with your registration process.

If you have not heard from us within 48 hours before your procedure, or if you have any questions regarding any of this information, please call us at 228-872-8854.



WE'RE HERE TO HELP

Our business office team will be glad to assist you in filing the necessary insurance claims.

Your Rights

ADVANCE DIRECTIVES

Advance directives are documents allowing patients to give direction about future medical care. They include:

- Living Will - Written instructions explaining wishes regarding health care should the patient have a terminal condition.
- Durable Power of Attorney - A written document naming a person to make decisions for the patient if the patient becomes unable to do so.
- DNR - Do Not Resuscitate. If a patient presents with a DNR Advance Directive, the patient will be informed that Ocean Springs Surgical & Endoscopy Center does not honor a DNR. The patient will be informed of other local hospitals that will accept DNRs.

Patients with advance directives are responsible for informing their physicians of their wishes and providing a copy to the facility.

STATEMENT OF LIMITATION

Ocean Springs Surgical & Endoscopy Center will, to the maximum extent practicable, honor a patient's advance directives. In the unlikely event that a patient's condition deteriorates while at Ocean Springs Surgical & Endoscopy Center, resuscitation of the patient will be attempted, with subsequent transfer to Ocean Springs Hospital where the patient's advance directives will be honored. If the patient refuses to accept this limitation, he or she can be referred to a facility that will honor his or her advance directives

PATIENT'S RIGHTS AND RESPONSIBILITIES

Better communication between the patient and the health care provider is always a priority to the Ocean Springs Surgical & Endoscopy Center team. Below is a summary of your rights and responsibilities.

A PATIENT HAS THE RIGHT TO:

1. Receive the care necessary to help regain or maintain his or her maximum state of health and to receive this care in a safe setting.
2. Expect personnel who care for the patient to be friendly, considerate, respectful and qualified through education and experience and perform the services for which they are responsible with the highest quality of service.
3. Expect full recognition of individuality, including personal privacy in treatment and care. In addition, all communications and records will be kept confidential.
4. Complete information, to the extent known by the physician, regarding diagnosis, treatment and prognosis, as well as alternative treatments or procedures and the possible risks and side effects associated with treatment.
5. Be fully informed of the scope of services available at the facility, provisions for after-hours and emergency care and related fees for services rendered.
6. Be a participant in decisions regarding the intensity and scope of the treatment. If the patient is unable to participate in those decisions, the patient's rights shall be exercised by the patient's designated representative or other legally designated person.
7. Refuse treatment to the extent permitted by law and be informed of the medical consequences of such a refusal. The patient accepts responsibility for his or her actions should he or she refuses treatment or not follows the instructions of the physician or facility.
8. Approve or refuse the release of medical records to any individual outside the facility, except in the case of transfer to another health facility, or as required by law or third-party payment contract.



ANY QUESTIONS?

If you have any questions regarding your procedure or any of the information in this booklet, please call your physician or Ocean Springs Surgical & Endoscopy Center's Pre-Op nurse at 228-872-8854.



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OPEN AND HONEST COMMUNICATION

Effective health care requires collaboration between patients and physicians and other health care professionals. Open and honest communication, respect for personal and professional values, and sensitivity to differences are integral to optimal patient care.

As the setting for the provision of health services, surgical centers must provide a foundation for understanding and respecting the rights and responsibilities of patients, their families, physicians, and other caregivers.

Surgical centers must ensure a health care ethic that respects the role of patients in decision making about treatment choices and other aspects of their care. They must be sensitive to cultural, racial, linguistic, religious, age, gender, and other differences as well as the needs of persons with disabilities.

9. Be informed of any human experimentation or other research/educational projects affecting his or her care or treatment, and can refuse participation in such experimentation or research without compromise to the patient's usual care.
10. Express grievances/complaints and suggestions at any time, including grievances regarding treatment or care that is (or fails to be) furnished.
11. Change primary or specialty physicians or dentists if other qualified physicians or dentists are available.
12. Provide patient access to and/or copies of his or her individual medical records.
13. Be informed as to the facility's policy regarding advance directives/living wills.
14. Be fully informed before any transfer to another healthcare facility or organization.
15. Express those spiritual beliefs and cultural practices that do not harm or interfere with the planned course of medical therapy for the patient.
16. Exercise his or her rights without being subjected to discrimination or reprisal.
To be free from all forms of abuse or harassment
17. If judged incompetent under applicable State health and safety laws by a court of proper jurisdiction, have the rights of the patient exercised by the person appointed under State law to act on the patient's behalf. If a State court has not judged the patient incompetent, any legal representative designated by the patient in accordance with State law may exercise the patient's rights to the extent allowed by State law.
18. Have an initial assessment and regular reassessment of pain.
19. Be educated, when appropriate, regarding his or her or the family's role in managing pain, as well as potential limitations and side effects of pain treatment.
20. Have their personal, cultural, spiritual and/or ethnic beliefs considered when communication to them and their families that pain management is an important part of care.

A PATIENT IS RESPONSIBLE FOR:

1. Being considerate of other patients and personnel and for assisting in the control of noise, smoking and other distractions.
2. Respecting the property of others and the facility.
3. Following the rules and regulations of the facility.
4. Reporting whether he or she clearly understands the planned course of treatment and what is expected of him or her. The patient should express concern if they believe they will have difficulty following the plan of care and discharge instructions.
5. Following the instructions as provided for the planned course of treatment.
6. Accepting the consequences if they do not follow the plan of care and discharge instructions.
7. Keeping appointments and, when unable to do so for any reason, for notifying the facility and physician.
8. Providing caregivers with the most accurate and complete information regarding present complaints, past illnesses and hospitalizations, medications, unexpected changes in the patient's condition or any other patient health matters. Patients are responsible for asking questions when they do not understand what they have been told or what they are expected to do.
9. Meeting their financial obligations to the facility as agreed to with the organization.

HIPAA

More detailed information about Protected Health Information (PHI) is in a separate brochure that all patients receive titled, "Protecting Your Health Information" which complies with the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

IF YOU NEED AN INTERPRETER

If you will need an interpreter, please let us know and one will be provided for you. If you have someone who can translate confidential, medical and financial information for you please make arrangements to have them accompany you on the day of your procedure.

COMPLAINTS/GRIEVANCES

If you have a problem or complaint, please speak to one of our staff to address your concern. If necessary, your problem will be advanced to center management for resolution. You have the right to have your verbal or written grievances investigated and to receive written notification of actions taken.

The following is the name you may contact:
Mary Lynn, Administrator
Ocean Spring Surgical & Endoscopy Center
3301 Bienville Boulevard, Ocean Springs, MS 39564
228-872-8854 (office) 228-872-0265 (fax)

You may contact the state to report a complaint:
Health Facilities Licensure and Certification, **Mississippi State Department of Health**
P.O. Box 1700, Jackson, MS 39215-1700
601-364-1100
www.msdlh.ms.gov/msdhsite/_static/30,0,83.html

Medicare beneficiaries may also file a complaint with the
Medicare Beneficiary Ombudsman.
www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html

Medicare
www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227)
TTY 877-486-2048 for complaints about quality of care

Office of the Inspector General Website: oig.hhs.gov

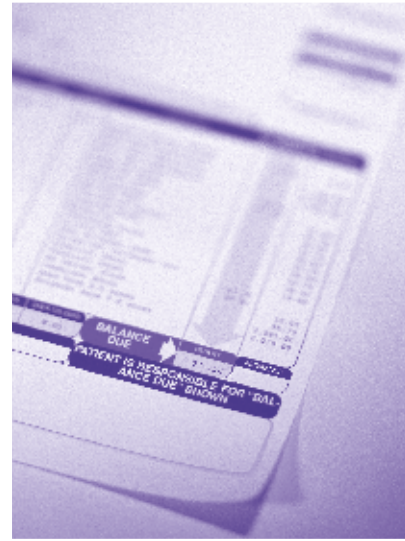
This facility is accredited by **Accreditation Association for Ambulatory Health Care** (AAAHC). Complaints or grievances may also be filed by contacting:
Tel: 847.853.6060 Fax: 847.853.9028 Email: complaints@aaahc.org

PHYSICIAN OWNERSHIP

Physician Financial Interest and Ownership: Physician Financial Interest and Ownership: The center is owned, in part, by the physicians. The physician(s) who referred you to this center and who will be performing your procedure(s) may have a financial and ownership interest. Patients have the right to be treated at another health care facility of their choice. We are making this disclosure in accordance with federal regulations.

The following physicians have a financial interest in the center:

William Avara, MD	Jeremy Simpler, MD
John, Bailey, MD	Gary Sinopoli, MD
William Descher, MD	Rob Siragusa, MD
Catherine Hirsch, MD	David Spencer, Jr., MD
Mark Lyell, MD	James Sutton, MD
David Owens, MD	Forrest Wells, MD
Ronald Rinker, MD	



You have a right to receive prior to treatment, a reasonable estimate of charges for medical care.



All patients have a right to be treated with courtesy and respect, with appreciation of their dignity, and with protection of privacy.

Ocean Springs
Surgical & Endoscopy Center

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HOURS OF OPERATION

Ocean Springs Surgical & Endoscopy Center
is open Monday-Friday
6:30 a.m. to 5 p.m.

IN CASE OF AN EMERGENCY

Should an emergency arise after you have been discharged, you should contact your physician, go to the nearest hospital emergency department, or call 911.



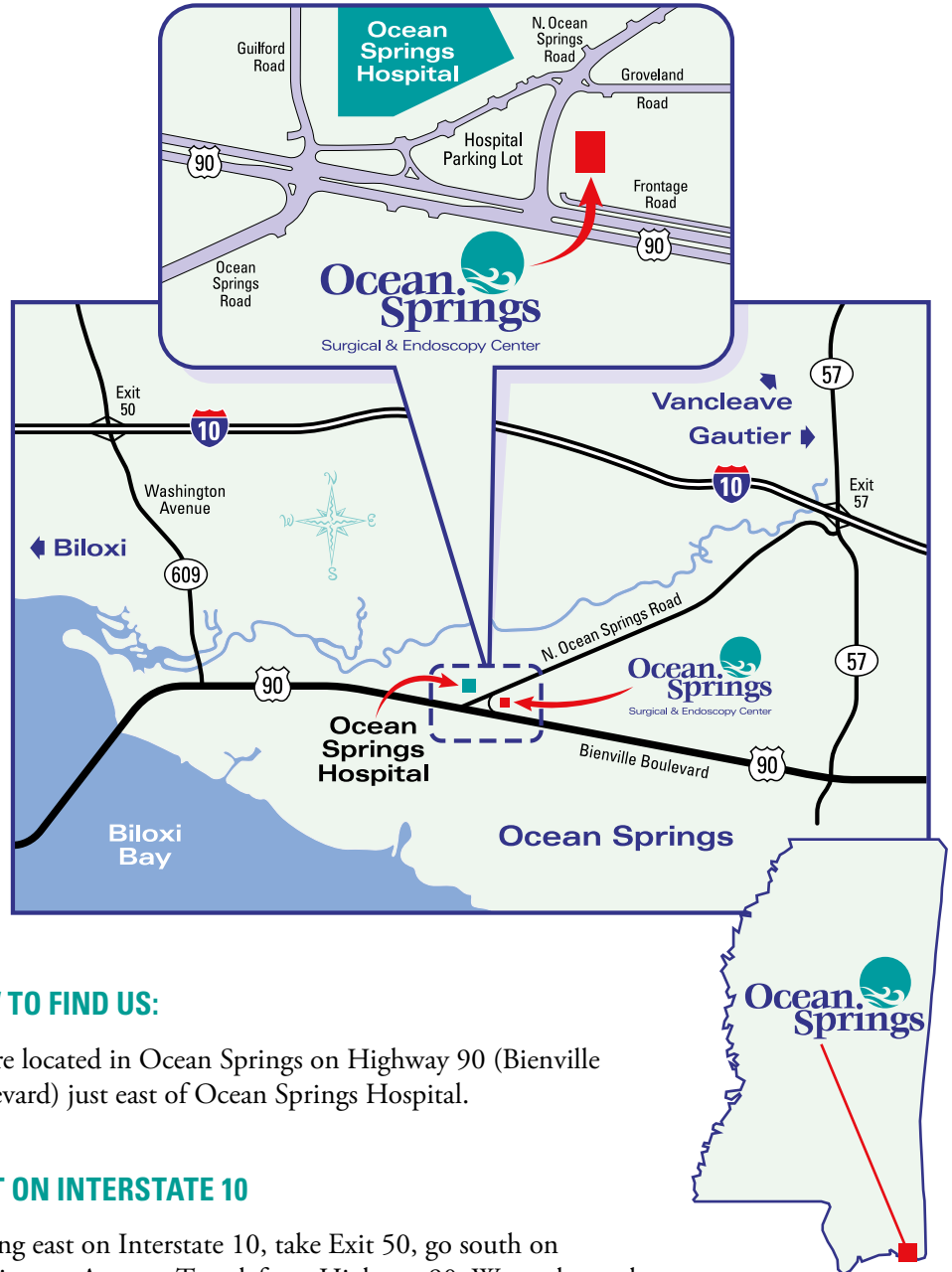
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HOW TO FIND US:

We are located in Ocean Springs on Highway 90 (Bienville Boulevard) just east of Ocean Springs Hospital.

EAST ON INTERSTATE 10

Driving east on Interstate 10, take Exit 50, go south on Washington Avenue. Turn left on Highway 90. We are located three miles on the left.

WEST ON INTERSTATE 10:

Driving west on Interstate 10, take Exit 57. Go south on Highway 57. Turn right on Highway 90. We are located three and a half miles on the right.