

Name: _____

Date of Surgery: _____

Arrival Time: _____



Welcome to First Surgical Woodlands.

We are pleased that you have made the decision to utilize our Ambulatory Surgical Center. We want to make your upcoming procedure as comfortable and as pleasant as possible. This brochure is designed to answer many of the questions you may have related to your upcoming procedure. Please review all the topics covered and **bring these signed forms with you on the day of your procedure.**

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Acknowledgement: I the undersigned, verify that I have read and fully understand the information contained in this packet.

Patient or Gaurdian Signature: _____

Date: _____



First Surgical Woodlands

111 Vision Park Blvd., Suite 200
Conroe, TX 77384

Ph: 936-271-1011

Fax: 936-271-1016

www.firstsurgicalwoodlands.com

Driving Directions:

If driving South on I-45, exit College Park / 242 exit number 79. Stay on the feeder road and proceed for 1 mile. Turn Right on Vision Park Blvd. We are located on the left in the Riverstone Professional Building.

If driving North on I-45, exit College Park / 242 exit number 79. U-turn under the freeway. Stay on feeder road heading south. Turn Right on Vision Park Blvd. We are located on the left in the Riverstone Professional Building.

Preparing for Surgery

Please help us meet all of your needs, please follow the following guidelines:

- **Do not eat or drink anything including water, chewing gum and mints 12 hours prior to surgery.** Medications for blood pressure, heart conditions, seizures, asthma or emphysema may be taken with a small sip of water at their usual prescribed times. If you use an inhaler, please bring it with you. Undigested food in your stomach can cause complications and your surgery is likely to be postponed for your own safety if you forget to follow these instructions.
- **Bathe or shower and brush your teeth** (taking care not to swallow any water) the morning of your surgery. This will assist you in feeling refreshed as well as minimize the chance of infection.
- **Do not wear mascara, makeup or jewelry.** If you wear contact lenses or glasses, bring a case for their safe keeping. For your safety, ALL piercings must be removed before the arrival to the surgery center. This includes earrings, brow, lips, etc.
- **Wear loose fitting, comfortable clothing** that is large enough to accommodate a large bandage after surgery if needed. Wear comfortable slip-on shoes; no high heels please.
- **Leave all valuables, including cash and jewelry at home.** We are not responsible for damaged or lost property.
- **Please arrive at the time given to you.** This allows ample time to prepare you for your procedure. Your family/escort will be asked to wait in the waiting room.
- **Do not smoke or drink alcoholic beverages for 24 hours before surgery.**

Medications

- **The medicines (including over the counter medications, herbal and dietary supplements) you take are a very important part of your health information.** Information such as your medication name, strength and directions for taking it will help the physician provide the best care for you.

After Surgery

- **The length of stay postoperatively** varies according to the type of procedure and your physician's instructions.
- **Your physician and nurse** will provide written postoperative instructions. Please follow all instructions carefully so your recovery will be as quick and comfortable as possible.
- **At anytime, if you have an urgent need regarding your procedure after discharge,** contact your physician or seek medical attention from a local emergency room.
- **For non-emergent questions regarding your procedure postoperatively,** contact the surgical center staff at 936-271-1011.
- **A nurse from First Surgical Woodlands will call you** at home the day after your procedure to check on your recovery.

Licensed Driver

- **A responsible driver, at least 18 years of age, must be available to drive you home** because you may receive medication/anesthesia that will make you drowsy. Failure to have someone available to drive you home will result in canceling or rescheduling your procedure. We recommend that someone remain with you for the first 24 hours after your procedure.

Financial Arrangements

A predetermined fee is charged for each type of procedure, thus providing a reasonably accurate estimate of your cost in advance. However, the exact charge will not be known until after your procedure is completed.

- **The fee for the surgery center,** physician and anesthesiologist are separate.
- **You will be asked to pay** deductibles and the estimated co-insurance the day of your procedure.
- **A member of the office staff will contact you** before your procedure to provide you with the amount of your deductible and an estimate of co-insurance.
- **Uninsured and/or cash patients** will be required to pay for services the day of surgery by cash, cashiers check or credit card.

Advance Directive Policy

- All patients have the right to participate in their own healthcare decisions and to make advance directive or to execute Power of Attorney that authorizes others to make decisions on their behalf based on the patient's expressed wishes when the patient is unable to make decisions or unable to communicate decisions. First Surgical Woodlands respects and upholds these rights.
- However, unlike an acute care hospital setting, First Surgical Woodlands does not routinely perform "high risk" procedures. Most procedures performed in this facility are considered to be of minimal risk. You will discuss the specifics of your procedure with your physician, who can answer your questions as to the risk involved, your expected recovery, and care after your surgery.
- **Therefore, it is our policy**, regardless of the content of any advance directive or instructions of a healthcare surrogate or attorney in fact, that if an adverse event occurs during your treatment at this facility, we will initiate resuscitative or other stabilizing measures and transfer you to an acute care hospital for further evaluation. At the acute care hospital, further treatment or withdrawal of treatment measures already begun will be ordered in accordance with your wishes, advance directive or Healthcare Power of Attorney.
- Your agreement with the policy does not revoke or invalidate any current healthcare directive or healthcare power of attorney.
- If you do not agree with this policy, we are pleased to assist you in rescheduling your procedure.
- Please visit www.dshs.state.tx.us/emstraumasystems/dnr.shtm for additional information on advance directives.

Your Privacy

- **Your privacy is important to us.** You will be issued a patient ID number at the time of registration for your privacy protection. Please give your patient ID number to the person who will be caring for you and / or driving you home. This will allow us to provide them with updates on the day of your procedure.



First Surgical Woodlands
111 Vision Park Blvd., Suite 200
Conroe, TX 77384

Patient Rights and Responsibilities

It is the intent of First Surgical Woodlands that every patient's civil and religious liberties, including the right to independent personal decisions and knowledge of available choices, shall not be infringed. The staff and the employees of the facility shall encourage and assist in your ability to exercise these rights.

Any guardian or agent of the patient may seek enforcement of these Patient's Rights and Responsibilities.

Your rights and responsibilities as a patient include the following:

1. You have the right to treatment regardless of your race, color, national origin, disability, age or source of payment for your care.
2. You have the right to exercise your rights without being subjected to discrimination or reprisal.
3. You have the right to receive care in a safe setting.
4. You have the right to be free from all forms of abuse or harassment.
5. You have the right to be fully informed about your treatment or procedure and the expected outcome before it is performed.
6. You have the right to expect the facility, within its capacity and stated mission, and within applicable laws and regulations, to respond to your requests and need for treatment.
7. You have the right to accept or refuse medical or surgical treatment and the right to initiate advance directives. If you have an advanced directive or wish to have one, please speak with a nurse. This ASC does not honor advanced directives, but in case of an emergency will provide a copy to the accepting hospital.
8. You are responsible for providing information about and/or copies of any living will or advanced directive.
9. You have the right to considerate and respectful care, which includes consideration of the psychosocial, spiritual and cultural considerations that influence your perception of illness.
10. You have the right, in collaboration with your physician, to make decisions regarding your healthcare.
11. You have the right to information that will enable you to make decisions regarding your treatment.
12. You have the right to accept medical care or refuse treatment to the extent permitted by law and be informed of medical consequences of such refusal.
13. You have the right to be informed of any experimentation or other research or educational project that affects your care or treatment.
14. You have the right, within limits of the law, to personal privacy, and confidentiality of information.

15. You are responsible for providing, to the best of your knowledge, accurate and complete information about your health status and past medical history and reporting any unexpected changes to the appropriate practitioner.
16. You are responsible for following the treatment plan recommended by the primary practitioner involved in your case.
17. You are responsible for providing adult transport to your home after surgery and for an adult to be responsible for you at home for the first 24 hours after surgery.
18. You have the right to know the identity of the physician primarily responsible for your care and to be informed as to the nature and purpose of any procedures to be performed.
19. You have the right, or your legally designated representative has the right, within the limits of the law, to information contained in your medical records.
20. You have the right to voice complaints or grievances regarding treatment or care that is (or fails to be) furnished. If you feel your rights or care have been compromised please contact the Director at 936-271-1011.
21. Please be informed your healthcare practitioner may have ownership in the ambulatory surgical center.

The physician's nurses and entire staff are committed to assure you reasonable care. If you feel your complaint or grievance was not resolved please report in writing to:

First Surgical Woodlands
 c/o Administrator
 111 Vision Park Blvd., Suite 200
 Conroe, TX 77384

If your complaint or grievance is not resolved to your satisfaction you may report to:

Texas Department of State Health Services
 Health Facility Licensing Division & Compliance Division
 c/o Director
 1100 West 49th Street
 Austin, TX 78756
 888-973-0022

For Medicare inquiries or complaints contact 1-800-MEDICARE or www.medicare.gov/Obudsman/resources/asp

 Patient's Signature

 Date

 Witness

 Date