



CHRISTUS[®] SANTA ROSA

Physicians Ambulatory Surgery Center

Your Patient Bill of Rights and Responsibilities:

- I. A patient has the right to respectful care given by competent personnel.
- II. A patient has the right, upon request, to be given the name of his/her attending practitioner, the names of all other practitioners directly participating in his/her care, and the names and functions of other healthcare persons that are having direct contact with patient.
- III. A patient has the right to consideration of privacy concerning his/her own medical care program. Case discussions, consultation, examination, and treatment are considered confidential and shall be conducted directly.
- IV. A patient has the right to have records pertaining to his own medical care treated as confidential except as otherwise provided by law or third party contractual arrangement.
- V. A patient has the right to know what CHRISTUS Santa Rosa Physicians Ambulatory Surgery Center (PASC) rules and regulations apply to his/her conduct as a patient.
- VI. The patient has the right to expect emergency procedures to be implemented without unnecessary delay.
- VII. The patient has the right to good quality care and high professional standards that are continually maintained and reviewed.
- VIII. The patient has the right to full information, in layman's terms, concerning diagnosis, treatment, and prognosis, including information about alternative treatments and possible complications. When it is not medically advisable to give the information to the patient, the information shall be given on his behalf to the responsible person.
- IX. Except for emergencies, the practitioner shall obtain the necessary informed consent prior to the start of a procedure. Informed consent is defined in Texas Administrative Code, Title 25, Part 7, Chapter 601.
- X. A patient or, if the patient is unable to give informed consent, a responsible person has the right to be advised when a practitioner is considering the patient as a part of a medical care research program or donor program, and the patient or responsible person shall give informed consent prior to actual participation in the program. A patient or responsible person may refuse to continue in a program to which he/she has previously given consent.
- XI. A patient has the right to refuse drugs or procedures, to the extent permitted by statute, and practitioner shall inform the patient of the medical consequences of the patient's refusal of drugs or procedures.
- XII. A patient has the right to medical and nursing services without discrimination based upon age, race, color, religion, sexual orientation, national origin, handicap, disability, or source of payment.
- XIII. The patient who does not speak English shall have access, where possible, to an interpreter.
- XIV. The PASC shall, upon request, provide the patient or patient's designee access to the information contained in his/her medical records, unless the attending practitioner for medical reasons specifically restricts access.
- XV. The patient has the right to expect good management techniques to be implemented by the PASC Facilities. Those techniques shall make effective use of the time of the patient and avoid the personal discomfort of the patient.
- XVI. The responsible person shall be notified when an emergency occurs and a patient is transferred to another facility. The institution to which the patient is to be transferred shall be notified prior to the patient's transfer.
- XVII. The patient has the right to expect that the PASC will provide information for continuing healthcare requirements following discharge, and the means for meeting them.
- XVIII. A patient has the right be informed of his/her rights at the same time of admission.
- XIX. The PASC expects the patient to ask questions about any directions or procedures they do not understand.
- XX. The PASC expects the patient to be considerate of other patients and staff in regard to noise, smoking, and the number of visitors in the patient areas. The patient is also expected to respect the property of the PASC and other persons.
- XXI. The patient is expected to follow instructions and medical orders and report unexpected changes in his/her condition to his/her physician and to the PASC's staff.
- XXII. The patient is expected to follow all safety regulations that he/she have been informed of and/or have read about.
- XXIII. If the patient fails to follow his/her healthcare provider's instructions, or if the patient refuses care, he/she is responsible for his/her own actions.
- XXIV. The patient can choose to change primary or specialty physicians or dentists if other qualified physicians or dentists are available.
- XXV. For complaints please contact: Health Facility Compliance Group (MC 1979) at PO BOX 149347, Austin, Texas 78714, or call 888.973.0022. You may also send complaints to their website: <http://www.medicare.gov/Ombudsman/activities.asp>.

Explanation of Ownership

Your physician may be a partner with ownership of the PASC. A list of physician partners is available upon request and is posted at all CHRISTUS centers. The Physicians and Allied Health Professionals practicing at PASC are licensed and/or credentialed to practice in this facility. The Physicians and Allied Health Professionals provide medical services at PASC, but they are not agents or employees at CASC.

General Information

Before You Arrive - Your surgeon will review with you the details of having your surgery performed at the PASC. You will be contacted by a business office representative to obtain and confirm necessary personal information and discuss any payment responsibilities. A member of the nursing staff will also attempt to contact you before your procedure to discuss your pre-operative instructions.

PASC Fees - Fees and charges will be explained and reviewed with you by PASC staff prior to your procedure. For more information contact (830) 643-8600.

Preparing for Surgery

Night Before Your Surgery

- The pre-operative nursing staff will make an attempt to contact you before your procedure. A message will be left on your answering machine only if the patient is identified on the outgoing message.
- Please DO NOT eat or drink anything after midnight on the evening before your surgery, unless instructed otherwise.
- If you are taking medications for high blood pressure, diabetes, or nervous disorders, contact your surgeon for specific instructions.
- Medications and anesthesia may be harmful to a fetus, especially in the first 12 weeks of pregnancy. If there is a possibility of pregnancy, please contact your surgeon prior to surgery.
- Notify your surgeon of any changes in your health or if you have been exposed to any communicable diseases.
- Please DO NOT drink alcoholic beverages 24 hours prior to your surgery.

The Morning of Surgery

- You should arrive at the PASC at the time provided by your surgeon with a photo ID and insurance card(s).
- Bathe the morning of surgery. If you shampoo your hair, make sure it is dry and do not use hairspray.
- Do not wear makeup, lipstick, or fingernail polish.
- Wear loose fitting, casual clothing that can be easily removed. Do not bring rings, watches, or other valuables to the PASC.
- Bring a list of all prescriptions you are currently taking and a written list of known allergies.

Prior to Surgery

- Patients must sign a surgical consent form before any medication can be given or surgery performed.
- Minors must have a parent or legal guardian sign consent from before surgery can be performed. The responsible individual must stay in the PASC before, during, and after the procedure.
- You must have an adult present or reachable by phone to assume responsibility after your procedure. (Our staff will call to verify that your ride is available) Your surgery will not be performed without a ride present or a reliable phone number.
- Smoking 24 hours before surgery may be detrimental to your recovery.

Following Surgery

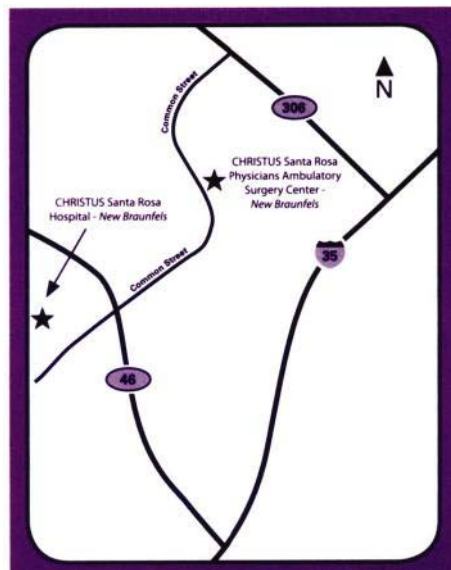
- Do not drive, operate machinery, power tools, sign important papers, or make critical decisions for at least 24 hours.
- Do not drink alcoholic beverages for at least 24 hours.
- A representative from the PASC will contact you the business day after surgery to inquire regarding your condition. If we do not reach you, you will receive a letter in the mail to inform you that an attempt was made to contact you.
- Your surgeon will provide you with post-operative instructions regarding diet, rest, and medication.
- In the event of any difficulties or complications, call your surgeon immediately.
- You will receive a survey to complete regarding your experience at the facility. Please fill it out and return in the self-addressed stamped envelope. We value your feedback.

Directions

* From IH 35, go North on HWY 46/Loop 337 to Common St. Turn RIGHT onto Common St. and go 1 mile. The (PASC) Surgery Center will be on your RIGHT.

* From HWY 281, go South on HWY 46. Turn LEFT onto HWY 46/Loop 337 to Common St. Turn LEFT onto Common St. The (PASC) Surgery Center will be on your RIGHT.

* From FM 306, go South to Common St. Turn RIGHT onto Common St. The (PASC) Surgery Center will be on your LEFT.



Patient's Name: _____

Your surgery schedule: _____

Time: _____

Date: _____

You should arrive at: _____

Special Instructions: _____
