

ST LOUIS

EYE SURGERY

& Laser Center

Your Guide To Same Day Surgery



314.686.4200

12990 Manchester Road, Suite 103
St. Louis, MO 63131

*It is your responsibility to read this
literature as it contains important
information*



Welcome to St. Louis Eye Surgery & Laser Center

You and your doctor have discussed and decided that you require surgery. This booklet will help answer your questions and provide you with necessary information about your upcoming procedure. Knowing what to expect will help alleviate fear and make you more comfortable. This booklet also provides you with information we are required to make available to you as mandated by state and federal authorities.

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**St. Louis Eye Surgery & Laser Center is owned & operated by
Des Peres Eye Surgery Center, LLC**

The following physicians have ownership interest in this center:

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Preparing for Surgery

1. PLEASE NOTE: If the patient scheduled for Surgery requires a Durable Power of Attorney (DPA), please be prepared to provide a copy to the surgery center upon check-in. If the DPA cannot be present on the day of surgery to sign surgical consent forms, please call the surgery center at 314-686-4200 before surgery for further instructions. For more information regarding DPA's please see pages 9-11 of this booklet.

2. In order for us to give you a safe anesthetic, we may need some tests done BEFORE your day of surgery.

If you are 50 years or older, we may require a recent (within 6 months) electrocardiogram (EKG). You will need to call/see your primary care physician to have this done.

If you have an Internal Cardioverter-Defibrillator (ICD), you will need to have your ICD physician complete a clearance form BEFORE day of surgery. Your eye doctor's scheduler can provide you with this form. **YOU MUST BRING YOUR ICD INFORMATION CARD (the card with the model number of your ICD device) WITH YOU ON THE DAY OF SURGERY.**



Stop eating, drinking, and smoking as directed.

PLEASE NOTE: Other tests may be required depending on your personal medical history.

3. If you are taking any medication for breathing, seizures, heart disease or blood pressure, take them the morning of your surgery with a small sip of water. If you use inhalers, bring them with you. If you are diabetic, do NOT take any pills or insulin the morning of your procedure.

4. A pre-operative nurse will attempt to call you before your scheduled surgery. During the call we will review your health history, medications, past surgeries, allergies and other information about your current health status. If you have additional questions, we will be happy to answer them.

5. Please arrange for a responsible adult to drive you home after the surgery and stay with you afterward, as needed. This person should be prepared to stay at the facility during your procedure

so the doctor can speak with them afterwards. In an effort to accommodate all patients and their family members, we ask that you limit the number of family members in the waiting room. If you have a large group or small children, we can provide a pager and you may wait in the 20/20 Café.

6. Please do NOT eat or drink anything after midnight before your procedure, unless directed otherwise. This includes water, mints, and gum. You can brush your teeth or rinse your mouth, but don't swallow any water. If you eat or drink after midnight, your surgery may be cancelled.

7. If you smoke or use tobacco products, quit or cut down a few weeks before surgery. Your healthcare provider may give you specific instructions.

8. Please wear comfortable loose clothing and shoes, and leave all valuables including jewelry at home. **You may want to bring your sunglasses to wear after your procedure, as the surgery center is unable to provide these to you.**

9. To cancel your procedure, we ask that you notify your physician's office at least 24 hours in advance.

10. Please inform us if you are experiencing any of the following:

* ILLNESS

* FEVER

* RASHES

* BREAKS IN THE SKIN

11. Notify your surgeon of any changes in your physical condition such as cold, fever, sore throat, rash or flu.

12. If you use a hearing aid, please wear it so that you're able to complete registration and hear questions or instructions.

The Day of Surgery

Checking In

When you arrive at St. Louis Eye Surgery and Laser Center, you will be greeted at the reception desk and asked to complete some informational papers and sign some consent forms. Be sure to ask any questions you have about these papers. Additionally, in order to protect your identity a valid driver's license or ID card indicating your current address is mandatory upon check-in. You also will be required to present your insurance card and submit payment for any co-pay or co-insurance amounts due.



Pre-Op (Before Surgery)

After checking in, you will be taken to a surgery preparation area (pre-op). Here you will be assessed and monitored by our nurses and technicians, be prepared for your specific procedure, and be seen by an anesthesiologist.

During Your Procedure

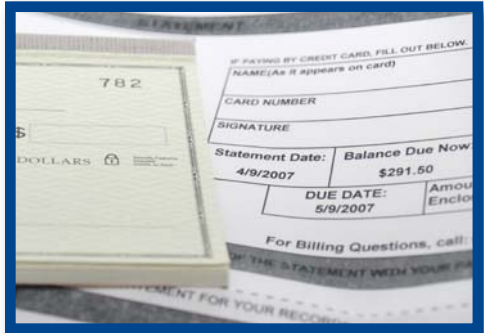
You will be transported to the operating room by stretcher. If it wasn't begun earlier, anesthesia will now be given. Sensors are placed on your chest and are attached to a monitor that shows your blood pressure, heart rate, and breathing rate. You will be kept comfortable throughout the procedure.

Post-Op (After Surgery)

After your procedure, you will be taken to our recovery area. The person responsible for taking you home is invited to join you at this time. Here you will be monitored by our nurses and prepared for discharge. You will be offered a light refreshment and given discharge instructions including your follow-up appointment and your surgeon's contact information. This is a great time to ask any questions.

Financial Information

To make payment convenient, we will bill your insurance carrier on your behalf. For this to be possible, it is necessary for you to supply your current insurance cards and photo identification upon arrival. Depending on your insurance carrier benefits, coverage will be verified with the carrier



prior to your procedure. **Co-insurance and co-payments are due on or before the day of surgery.** We accept cash, checks, and most major credit cards. You will be billed for any uncovered charges after your insurance carrier has made payment to your account. Please be aware that outstanding balances are referred to a collection agency after 90 days. Billing questions can be answered by calling (314) 686-4200 and asking for the billing department.

Anesthesia Billing

Your anesthesia is provided by an anesthesia care team. The team includes a physician anesthesiologist who medically directs a certified registered nurse anesthetist (CRNA). Some insurance providers send ONE bill for anesthesiologist services, while other insurance providers send TWO separate bills (one for the physician anesthesiologist and one for the CRNA). Please note that the TOTAL amount of the anesthesia services is the same whether the anesthesia is administered by a care team or a single provider. Following surgery, you may contact HSI (Ballas Anesthesia's billing company) at (314) 989-0300 for billing questions specifically regarding the anesthesia portion of your care.

Patient Rights

The facility and medical staff have adopted the following list of patient rights. This list shall include but not be limited to the patient's right to:

(a) A patient will not be denied appropriate care based on race, religion, color, national origin, sex, age, handicap, marital status, sexual preference or source of payment.

(b) An individual who is or has been a patient is entitled to inspect, or receive for a reasonable fee, a copy of his or her medical record upon request with prior authorization of the patient.

(c) A patient is entitled to confidential medical records, and may refuse their release to a person outside the facility except as required because of a transfer to another healthcare facility or as required by law or third party payment contract.

(d) A patient is entitled to privacy, to the extent feasible, in treatment and in caring for personal needs with consideration, respect, and full recognition of his or her dignity and individuality.

(e) A patient is entitled to receive adequate and appropriate care, and to receive, from the appropriate individual within the facility, information about his or her medical condition, proposed course of treatment, and prospects for recovery, in terms that the patient can understand, unless medically contraindicated as documented by the physician in the medical record.

(f) A patient is entitled to refuse treatment to the extent provided by law and to be informed of the consequences of that refusal. When a refusal of treatment prevents the health facility its or staff from providing appropriate care according to ethical and professional standards, the relationship with the patient may be terminated (unless legal documentation is presented) upon reasonable notice and with referral information for another healthcare provider.

(g) A patient is entitled to exercise his/her rights as a patient and as a citizen, and to this end may present grievances to government officials, or to another person of his or her choice within or outside the facility, free from restraint, interference, coercion, discrimination, or reprisal. A patient is entitled to information about the facility's policies and procedures for initiation, review, and resolution of patient complaints. Complaints can be sent to:

- St. Louis Eye Surgery and Laser Center or • You can learn more about how to file a complaint from the website at www.hhs.gov/hippa/ or by calling 1-866-627-7748; the phone call is free.
- 12990 Manchester Rd. Ste. 103
- Des Peres, MO 63131
- (314) 686-4200
- Melanie Kofron, R.N., M.H.A.
- Administrator & Clinical Director

(h) A patient is entitled to information concerning an experimental procedure proposed as part of his or her care and shall have the right to refuse to participate in the experiment without jeopardizing his or her continuing care.

(i) A patient is entitled to receive and examine an explanation of his or her bill regardless of the source of payment and to receive, upon request: information relating to

financial assistance available through the facility.

(j) A patient is entitled to know who is responsible for and who is providing his or her direct care, is entitled to receive information concerning his or her continuing health needs and alternatives for meeting those needs, and to be involved in his or her discharge planning, if appropriate.

(k) Patient is entitled to associate and have private communications and consultations with his/her physician or any other person of his or her choice. A patient's civil and religious liberties, including the right to independent personal decisions and the right to knowledge of available choices, shall not be infringed and the facility shall encourage and assist in the fullest possible exercise of these rights.

(l) A patient is entitled to be free from performing services for the facility that are not included for the therapeutic purpose in the plan of care.

(m) A patient is entitled to information about the health facility rules and regulations affecting patient care and conduct.

(n) Patient is entitled to be informed that some physicians on staff have a financial relationship with the surgery center because they are investors and own shares in the facility.

Patient Responsibilities

The care a patient receives depends partially on the patient themselves. Therefore, a patient has certain responsibilities as well. These responsibilities shall be presented to the patient in the spirit of mutual trust and respect.

(a) The patient has the responsibility to provide accurate and complete information concerning his/her present complaints, past medical history, and other matters relating to his/her health.

(b) The patient is responsible for making it known whether he/she clearly comprehends the course of his/her medical treatment and what is expected of him/her.

(c) The patient is responsible for following the treatment plan established by his/her physician, including the instructions of health professionals as they carry out the physician's orders.

(d) The patient is responsible for keeping appointments and for notifying the facility or physician when he/she is unable to do so.

(e) The patient is responsible for his/her actions should they refuse treatment or not follow his/her physician's orders.

(f) The patient is responsible for assuring that the financial obligations of his/her care are fulfilled.

(g) The patient is responsible for following facility policies and procedures.

(h) The patient is responsible for being considerate of the rights of other patients and facility personnel.

(i) The patient is responsible for being respectful of his/her personal property and that of other persons in the facility and the belongings of that facility itself.

(j) The patient is responsible to present their Advance Directives to the facility that are to be followed in the event he/she could not make his wishes known concerning emergency or life prolonging procedures.

Advance Directives

When a patient cannot make healthcare decisions on his/her own behalf, legally binding written instructions, called Advance Directives, may be used instead. Examples of Advance Directives include Living Wills, Durable Power of Attorney for Health Care and Do Not Resuscitate Declaration.

St. Louis Eye Surgery and Laser Center's policy states that if you have an Advance Directive, you must inform us, so we may place a copy of it in your medical record.

If you wish to discuss Advance Directives, you may contact your healthcare provider.

Advance Directive forms must be completed prior to your procedure, should you elect to execute one.

We are giving you this material to tell you about your right to make your own decisions about your medical treatment. As a competent adult, you have the right to accept or refuse any medical treatment. **“Competent” means you have the ability to understand your medical condition and the medical treatments for it, to weigh the possible benefits and risks of each such treatment and then to decide whether you want to accept treatment or not.**

WHO DECIDES WHAT TREATMENT I WILL GET?

As long as you are **competent**, you are the only person who can decide what medical treatment you want to accept or reject. You will be given information and advice about the pros and cons of different kinds of treatment and you can ask questions about your options. But only you can say “yes” or “no” to any treatment offered. You can say “no” even if the treatment you refuse might keep you alive longer and even if others want you to have it.

WHAT IF I'M IN NO CONDITION TO DECIDE?

If you become unable to make your own decisions about medical care, decisions will have to be made for you. If you haven't given prior instructions, no one will know what you would want. There may be difficult questions: for instance, would you refuse treatment if you were unconscious and not likely to wake up? Would you refuse treatment if you were going to die soon no matter what? Would you want to receive any treatment your caregivers recommend? When your wishes are not known, your family or the courts may have to decide what to do.

WHAT CAN I DO NOW TO SEE THAT MY WISHES ARE HONORED IN THE FUTURE?

While you are competent, you can name someone to make medical treatment decisions for you should you ever be unable to make them for yourself. To be certain that the

person you name has the legal right to make those decisions, you must fill out a form called either a Durable Power of Attorney for Health Care or Patient Advocate Designation. The person named in the form to make or carry out your decisions about treatment is called a Patient Advocate. You have the right to give your Patient Advocate, your caregivers and your family and friends written or spoken instructions about what medical treatment you want and don't want to receive.

WHO CAN BE MY PATIENT ADVOCATE?

You can choose anyone to be your Patient Advocate as long as the person is at least 18 years old. You can pick a family member or a friend or any other person you trust, but you should make sure that person is willing to serve by signing an acceptance form. It's a good idea to name a back choice, too, just in case the first person is unwilling or unable to act when the time comes.

WHERE CAN I GET A PATIENT ADVOCATE DESIGNATION FORM?

Many Missouri hospitals, surgery centers, health maintenance organizations, nursing homes, homes for the aged, hospice and home healthcare agencies make forms available to people free of charge. Many senior citizens' groups and church and civic groups do too. You can also get a free form from various members of the Missouri legislature.

Many lawyers also prepare Patient Advocate Designations for their clients. The forms aren't all alike. You should pick the one which suits your situation the best.

HOW DO I SIGN A PATIENT ADVOCATE DESIGNATION FORM SO THAT IT'S VALID?

All you have to do is fill in the name of the advocate and sign the form in front of two witnesses. But that's not as simple as it sounds, because under this law, some people cannot be your witnesses.

Your spouse, parents, grandchildren, children, and brothers or sisters, for example, cannot witness your signature. Neither can anyone else who could be your heir or who is named to receive something in your will, or who is an employee of a company that insures your life or health. Finally, the law disqualifies the person you name as your Patient Advocate, your doctors and all employees of the facility or agency providing healthcare to you from being a witness to your signature. It's easier to make a Patient Advocate Designation before you become a patient or a resident of a healthcare facility or agency. Friends or co-workers are often people to ask to be witnesses, since they see you often and can, if necessary, swear that you acted voluntarily and were of sound mind when you made out the form.

DO I HAVE TO GIVE MY PATIENT ADVOCATE INSTRUCTIONS?

No. A Patient Advocate Designation can be used just to name your Patient Advocate, the person you want to make decisions for you.

But written instructions are generally helpful to everyone involved. And, if you want your Patient Advocate to be able to refuse treatment and let you die, you have to say so specifically in the Patient Advocate Designation document itself. Any other instructions you have you can either write down or just tell your Patient Advocate. Either way, the Patient Advocate's job is to follow your instructions.

CAN I JUST GIVE INSTRUCTIONS AND NOT NAME A PATIENT ADVOCATE?

Yes. You can simply tell somebody, for example, your caregiver, or your family and close friends, what your wishes are. Better yet, you can write what is called a "Living Will", which is a written statement of your choices about medical treatment. Even though there is not yet a state Living Will law, courts and health care providers still find Living Wills valuable. Those taking care of you will pay more attention to what you have written about your treatment choices, whether in a Patient Advocate Designation or a Living Will, because they can be more confident they know what you would have wanted. Most doctors, hospitals, and other health care providers will also pay attention to what you've said to others, especially your family, about medical treatment. But again, it's better for everyone involved if you write your wishes down.

DO I MAKE A DECISION NOW ABOUT MY FUTURE MEDICAL TREATMENT?

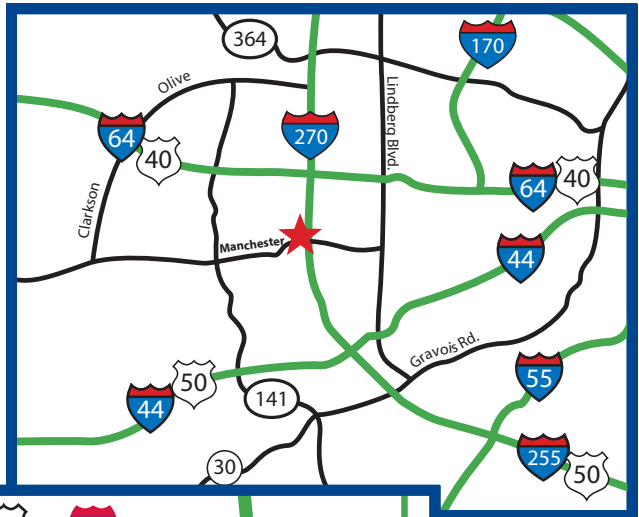
No. You don't have to fill out a Patient Advocate Designation or a Living Will and you don't have to tell anybody your wishes about medical treatment. You will still get the medical treatment you choose now, while you are competent. If you become unable to make decisions, but you've made sure that your family and friends know what you would want, they would be able to follow your wishes. Without instructions from you, your family or friends and caregivers may still be able to agree how to proceed. If they don't, however, a court may have to name a guardian to make decisions for you.

IF I MAKE DECISIONS NOW, CAN I CHANGE MY MIND LATER?

Yes. You can give new instructions in writing or orally. You also can change your mind about naming a Patient Advocate at all and cancel a Patient Advocate Designation at any time. You should review your Patient Advocate Designation or Living Will at least once a year to make sure it still accurately states how you want to be treated and/or names the person you want to make decisions for you.

WHAT ELSE SHOULD I THINK ABOUT?

Treatment decisions are difficult. We encourage you to think about them in advance and discuss them with your family, friends, advisors, and caregivers. You can and should ask your facility or agency about their treatment policies and procedures to be sure you understand them and how they work. If you want more information about a Patient Advocate Designation or Living Will, or sample forms, please ask your caregivers for assistance. Many facilities and agencies have staff available who can answer your questions. Additional materials may be available from your State Representative or Senator.



From St. Louis/Clayton/CreveCoeur

Take I-270 to Manchester Road West Exit. Travel 1 mile west to the Manchester Road East turnaround.

Exit Left. Travel 1/2 mile. When you see **Fox Jewelers** (white brick building with green awning)

SLOW DOWN. You will turn Right, **immediately** past **Fox Jewelers** and into The St. Louis Eye Surgery & Laser Center located in the Eye and Surgery Centers building.

From Chesterfield

Take Hwy 40/I-64 to Hwy 141 (South). Turn left (East) on Manchester Road and travel 2.8 miles.

When you see **Fox Jewelers** (white brick building with green awning) **SLOW DOWN.** You will turn

Right, **immediately** past **Fox Jewelers** and into The St. Louis Eye Surgery & Laser Center located in the Eye and Surgery Centers building.

From Fenton

Take Hwy 270 North to Manchester Road West Exit. Travel 1 mile west to the Manchester Road East

turnaround. Exit Left. Travel 1/2 mile. When you see **Fox Jewelers** (white brick building with green

awning) **SLOW DOWN.** You will turn Right, **immediately** past **Fox Jewelers** and into The St. Louis Eye Surgery & Laser Center located in the Eye and Surgery Centers building.