

Surgery Patient Guide



**WASHINGTON INSTITUTE
ORTHOPEDIC CENTER**

12707 - 120th Avenue NE • Suite 203

Kirkland, WA 98034

425-820-1221

FAX 425-821-9362

www.orthowashington.com

mail@orthowashington.com

David S. Badger, M.D.

Orthopedic Surgeon

Sports Medicine

Fellow AAOS

Jason J. Boyer, M.D.

Orthopedic Surgeon

Sports Medicine

Fellow AAOS

Steven T. Bramwell, M.D.

Orthopedic Surgeon

Sports Medicine

Fellow AAOS

L. Kirk Lorimer, D.P.M.

Podiatric Physician and Surgeon

Diplomate, American Board of

Foot and Ankle Surgery

Welcome!

Washington Institute Orthopedic Center, LLC is pleased you have chosen us for your surgical needs. We are committed to working with you for a comfortable stay and quick recovery.

Washington Institute Orthopedic Center Limited Liability Corporation (LLC) jointly owned by Dr. David Badger and Dr. Jason Boyer. The center is also accredited by Medicare and Joint Commission.

Please read this surgery patient guide carefully. It includes important information about your upcoming surgical visit.

Let your primary care physician (family practitioner, internist, cardiologist, pediatrician) know you will be having surgery.

Surgery Date:

Patient Checklist

- No labs required.
- Obtain required pre-op testing before scheduled pre-surgical appointment.
- Pre-surgical appointment with our PA:
- Determine benefits with your insurance.

Office Contacts

Surgery scheduling or changes: Surgery Scheduler **425-820-1221** surgery@orthowashington.com

Financial and insurance questions: Billing Office **425-284-0660** billing@orthowashington.com



Patient Bill of Rights and Responsibilities

Washington Institute Orthopedic Center represents a Patients Bill of Rights with the expectation that the observance of these rights will contribute to more effective patient care and greater satisfaction for the patient, physicians and organization.

Patient care outcomes are influenced by the degree to which the rights are communicated, understood and respected during each patient encounter Washington Institute Orthopedic Center.

Patient Rights

The right to be cared for and treated with respect and dignity and consideration.

To be protected from abuse and neglect.

To access protective services.

To have confidentiality, privacy, security, spiritual care and not restricted from communication with others. If communication restrictions are necessary for patient care and safety, Washington Institute Orthopedic Center must document and explain restrictions to family and patient.

To be informed and agree to their care; to be given information about procedure, risks and benefits, so that they may give informed consent.

To be informed of unanticipated outcomes.

To be involved in all aspects of their care including refusing care and treatment, and resolving problems with care decision.

To have family input in care decisions, in compliance with existing legal directives of the patient or existing court-issued orders.

To be informed of any person other than routine personnel that would be observing or participating in his/her treatment and to refuse that observation and/or participation.

To information concerning the facility to which he/she may have to be transferred. The facility, that the patient is to be transferred to, must give approval prior to the patient transfer.

To know if any research will be done during his/her treatment and has the right to refuse it.

To complain about their care and treatment without fear of retribution or denial of care, to have timely complaint resolutions within 30 days.

To be free from any act of discrimination, abuse, harassment, reprisal and receive care in a safe setting.

Personal privacy and to know the facility will comply with rules for privacy and security-HIPPA.

To examine and receive and explanation of his/her bill regardless of the source of payment.

To be provided with a written statement of their patient rights.

Patient Responsibilities

To provide accurate and complete information regarding health, medications, including over the counter, dietary supplements, past complaints, hospitalizations and any health matters.

To read and understand all permits and consents to be signed, asking Physician or Nurse to clarify any questions.

Promptly report any changes in their condition to the Physician.

To notify Washington Institute Orthopedic Center if you have a living will, medical power of attorney, or other directive that could affect your care.

Follow the treatment plan as prescribed by his/her provider.

To provide adult transportation to and from Washington Institute Orthopedic Center and remain with you for 24 hours, appropriate to the medications and/or anesthesia to be given, and according to, the preoperative instructions.

Comply with policies to ensure safety of patient, staff and visitors.

Understand their acceptance of responsibility if they refuse medical treatment or instructions.

To assure all payments for service rendered are on a timely basis and ultimate responsibility is the patients, regardless of the insurance coverage.

To provide financial and/or insurance information regarding who will be responsible for the bill including current address and authorized contact information.

Be considerate of rights of other patients.

Adhere to and respect organizations rules and regulations affecting care and conduct.

To notify administration of Washington Institute Orthopedic Center if the patient or the patient's representative thinks their right(s) have been violated or if the patient has a significant complaint.

Complaints

Washington Institute Orthopedic Center are responsible to provide you safe and competent care. Whenever possible, you should communicate any complaint or concern about your surgery care with our surgical center administrator, Kori Lorimer, at sca@orthowashington.com or (425) 899-5566.

Anyone who has concerns about care received at our facility may also contact the following agencies:

Medicare:

Mail: HSQA Complaint Intake
PO Box 47857
Olympia, WA 98504-7857

Phone: 1-800-633-6828
This number is on a 24 hour-7 day a week message machine.
A registered nurse will return your call Monday through Friday, 8:00 AM to 5:00 PM.

Fax: 360-236-2626

Email: HSQAComplaintIntake@doh.wa.gov

Office of the Medicare Beneficiary Ombudsman: www.medicare.gov/ombudsman/resources.asp

Medicare help and support: 1-800-MEDICARE

Joint Commission (JCAHO):

Mail: Office of Quality Monitoring
The Joint Commission
One Renaissance Boulevard
Oakbrook Terrace, Illinois 60181

Phone: 800-994-6610
Monday through Friday, 8:30AM to 5:00 PM Central Time

Fax: 630-792-5636

Email: complaint@jointcommission.org

Web: www.jointcommission.org



Financial Payment Policy

The following information outlines our policies regarding payment of your surgery bill:

While we will do our best to assist you any way that we can, **you are responsible to understand your specific coverage.** Whether you have commercial insurance, Medicare, or Medicaid, we recommend that you contact your carrier in advance to clarify your benefits, determine if the doctor and the facility are both covered "in" network, and if any pre-certification is required. Some insurance companies require patients to obtain pre-certification for other outpatient services (ie. number of physical therapy visits, CT scans, MRI's, etc.). **This is the responsibility of the patient.**

As a courtesy, we extend to all our patients, we will be happy to bill the appropriate insurance company or agency on your behalf for all claims. **It is important that each patient understand that they are responsible for any portion of the bill not covered by insurance, Medicare, or Medicaid. No discounts or reduction of the amount billed will be negotiated after services are rendered.**

During the surgical procedure, the doctor may determine that additional procedures are required. This may add additional costs and it will be the responsibility of the patient to pay any portion of the bill not covered by their insurance.

For co-payments, co-insurance, deductibles, self-pay accounts and those expenses that are not covered by your policy, you are asked to pay your portion of the bill at the time services are rendered or make appropriate payment arrangements with our financial counselors. For your convenience, we accept cash, personal checks, Visa/MasterCard credit cards and debit cards.

As a reminder, there are **three** components to your overall bill. You will receive a bill from the anesthesiologist, a bill from Washington Sports Medicine for the surgeon and a bill from Washington Institute Orthopedic Center for the surgical facility usage. Out of pocket expenses may be incurred from all three components for portions of the bill not covered by insurance.

Please sign the attached form stating that you have read and understand the above policy.

Again, thank you for choosing Washington Institute Orthopedic Center. We are committed to providing you with the best possible care.



About Advance Directives

Health care directive (also known as a living will)

A health care directive, commonly referred to as a “living will,” is a legal document specifying your wishes regarding the care you receive at the end of life, should you be unable to communicate them. In Washington State, the directive is used only if you have a terminal condition where life-sustaining treatment would only artificially prolong the process of dying, or if you are in an irreversible coma and there is no reasonable hope of recovery.

Health care directives may also be called a directive to a physician, declaration, or medical directive.

Durable power of attorney for health care

A durable power of attorney for health care is a legal document allowing you to name a person as your health care agent – someone who is authorized to consent to, stop, or refuse most medical treatment for you if a physician determines you cannot make these decisions yourself. Once appointed, your health care agent can speak on your behalf anytime you are unable to make your own medical decisions, not only at the end of life.

This type of advanced directive is also referred to as a health care proxy, appointment of health care agent, or a medical power of attorney.

Do I need an advanced directive?

Advanced directives are the best possible assurance that decisions regarding your future medical care will reflect your own wishes if you are unable to voice these wishes. For this reason, every person aged 18 or over should prepare a directive.

Do I need both a living will and a durable power of attorney for health care?

Yes. Having both a living will and a durable power of attorney for health care will provide the best protection for your treatment wishes.

A durable power of attorney will allow for some flexibility regarding treatment decisions, since the agent that you choose to represent your wishes will be able to respond to unexpected changes in your condition and base decisions not just on your written wishes, but also on their familiarity with you and your feelings regarding your care.

A living will is necessary to provide instruction in case your agent is unable to serve, to provide evidence that the agent is acting in good faith in case the agent’s decisions are challenged, or to serve as the primary record of your wishes in case you are unable to appoint a health care agent.

Are advance directives legal?

Yes. There are federal and state laws that govern the use of advanced directives. The federal law, the Patient Self-Determination Act, requires health care facilities that receive Medicaid and Medicare funds to inform patients of their rights to execute advanced directives. All 50 states and the District of Columbia have laws recognizing the use of advanced directives.

Will my Washington state advance directive be recognized in another state?

Many states have laws that honor out-of-state directives. If you travel, take copies of your directives with you. If you spend a significant amount of time in another state, it is a good idea to fill out an advanced directive form for that particular state.

Note: Washington State does not require durable power of attorney for health care to be notarized or witnessed. As some states do require notarization, you may want to do so in the event you travel out-of-state.

Will advanced directives be recognized in emergencies?

No. During most emergencies there is not enough time for emergency service personnel to consult the patient's advance directive. Once the patient is under the direct care of a physician, there will be time for the advance directive to be evaluated and/or the health care agent to be consulted.

What should I do with these forms once completed?

Signed copies of the completed directives should be included in your medical record, given to any person to whom you give your durable power of attorney – including any alternate people you may have named – and to your personal attorney. Originals should be in a safe but accessible place (not a safe deposit box).

Things to remember

It is essential that you have honest and open discussions with your appointed health care agent, doctor(s), clergy, and family and friends about your wishes concerning medical treatment. Discuss your wishes with them often, especially if your medical condition changes.

If you wish to make changes to the directives, you should complete new documents.

You can always revoke one or both of your Washington State directives. If you choose to revoke your documents, make sure you notify your health care agent, alternate agents, your family and your doctor(s).

For more information

You are encouraged to discuss the directives with your physician. Any legal questions you may have about the use and effect of these directives should be answered by an attorney.



Pre-Surgical Evaluation

A complete pre-surgical evaluation is an important part of the surgical process.

Pre-operative testing **may** be required, depending on your age, medical history, or type of surgery.

You can choose to have these tests performed at your personal physician's office or at the Evergreen Hospital Medical Center.

Please obtain any of the following **CHECKED** pre-operative tests and/or clearances before your scheduled pre-op appointment.

- | | |
|--|--|
| <input type="checkbox"/> 12 lead Electrocardiogram (EKG) | <input type="checkbox"/> CBC |
| <input type="checkbox"/> BMP | <input type="checkbox"/> Medical clearance by primary care physician |
| <input type="checkbox"/> Cardiac clearance | <input type="checkbox"/> Other: <input type="text"/> |

All surgical patients are scheduled to see one of our Physician's Assistant (PA) before surgery. During this visit the PA will go over the surgical procedure in detail, evaluate your physical health, sign the surgical consent, and answer any questions you may have. Please have all pre-operative testing done before this appointment. Please bring a complete list of all medications, vitamins, and supplements you are taking to your Pre-Op appointment.

If you need to cancel or change your surgery, please allow at least 24-hour notice.

Eating and Drinking Before Surgery

It is vital for your safety that you observe the following restrictions since any stomach contents can be potentially life threatening. **If you do not follow these instructions your surgery will be canceled.**

- 1. Do not eat anything after midnight the day before surgery.** You may have sips of clear liquids until 3 hours before your check in time. Examples of clear liquids: water, black coffee or tea, bouillon, plain jello, clear apple juice, Gatorade, and popsicles. Avoid: orange juice, tomato juice, juices with pulp, milk or milk products and creamers.
- 2. During the 3 hours immediately before your surgery, you must have nothing by mouth** including gum, lifesavers, breath mints, cigarettes or chewing tobacco.
- 3. If you take any daily medications the pre-admit nurse will instruct you on which medication to take after midnight on the day of surgery. Take the required medications with very small sips of water.**
- 4. If you are taking any blood thinning medicines such as aspirin, Advil, Aleve, or Motrin, please talk with your surgeon about when to discontinue medication prior to surgery.**

Preparing for Surgery

On the day of surgery make sure you have a designated driver who can drive you home after you are discharged. Remember to wear loose, comfortable clothes. If you are having shoulder surgery it is a good idea to wear a button-down shirt. Please do not wear makeup, lipstick, lotions, or perfumes. For your safety, jewelry and body piercings must be removed prior to surgery.

There are times when the surgery schedule changes on the day of your surgery. For this reason, please stay close to your phone in the event there is a change in your arrival time.

Valuables

You will need to bring surgery deposits if required by billing, otherwise please leave other money, credit cards, jewelry, and other valuables at home.

Surgery Check-in Time

A pre-admit nurse will call you the day prior to your surgery by 3:00 pm to give you a check in time and answer any questions that you may have.

Before Surgery

When you arrive, you will be greeted by our friendly admitting staff who will register you for surgery. In the pre-op area, a nurse will conduct a brief assessment. You will also meet the anesthesiologist. In addition, you will meet the nurse who will care for you during surgery.

During surgery, family members or friends are welcome to wait in the surgery waiting area located across the hall from the check-in.

After Your Surgery

Immediately after your surgery you will be observed and gradually awakened in our post-operative recovery area where you will receive a snack and post-operative instructions before being discharged. When your surgeon has considered it appropriate for you to leave, our staff will accompany you and your designated driver to your vehicle and you will return to the comfort of your own home to be cared for by family and/or friends. A recovery room nurse will call you the following day to see how you are doing.

Returning Home

For your safety, we will be unable to perform your surgery unless you have someone with you who can drive you home following discharge. You should also have a responsible adult stay with you at home for at least 24 hours after your surgery.

Contacting Your Insurance Company

Contact your insurance carrier in advance to clarify your benefits, determine if the doctor and the facility are both covered "in" network, and if pre-certification is required. You will also need to find out whether there is a co-payment amount or other restrictions.

A Patient Account Representative from our office will contact you should a deposit be required on the day of surgery. These amounts are based on pre-operative findings. For your convenience, cash, personal check, Visa, or MasterCard are accepted. The basic charge does not include the fees of the anesthesiologist.

Please read the attached financial policy for complete details.

You will need the following information when contacting your insurance company:

Facility: Washington Institute Orthopedic Center

Tax ID of our facility: 91-2087449

The surgical procedure/s you are scheduled for is/are:

The following codes are based on preoperative findings:

Diagnostic codes:

Procedural codes: