

PATIENT RESPONSIBILITIES

- To provide complete and accurate information to the best of their ability about their health, any medications, including over the-counter products and dietary supplements and any allergies or sensitivities.
- To follow the treatment plan prescribed by their provider, including pre-operative and discharge instructions.
- To provide a responsible adult to transport them home from the facility and remain with them for 24 hours, if required by their provider.
- To inform their provider about any living will, medical power of attorney, or other advance healthcare directive in effect.
- To accept personal financial responsibility for any charges not covered by their insurance.
- To be respectful of all healthcare professionals and staff, as well as other patients

NOTICE OF NONDISCRIMINATION

Discrimination is Against the Law

SCNETX complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

SCNETX does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

SCNETX:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact
[Lori Bolden – administrator @903-792-2108]

If you believe that SCNETX has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Lori Bolden-Administrator , 1902 Moores Ln Suite B Texarkana Texas 75503, 903-792-2108 phone, 903-792-0606 Fax, lori.bolden@amsurg.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Lori Bolden– Administrator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at:

<https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>
or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue SW., Room 509F,
HHH Building, Washington, DC 20201
1-800-368-1019, 800-537-7697 (TDD).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Source: HHS Office for Civil Rights

This facility is accredited by the Accreditation Association for Ambulatory Health Care (AAAHC). Complaints or grievances may also be filed through:

AAAHC

5250 Old Orchard Road, Suite 200 Skokie, IL 60077
Phone: 847-853-6060 or email: info@aaahc.org

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.

French: ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-903- 792-2108 (ATS : 711).

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-903-792-2108(TTY: 711).

Chinese: 注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 1-903-792-2108 (TTY : 711).

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:

Dr. Carey Alkire	AMSURG Holdings
Dr. John Dietze	Dr. James Booker
Dr. Jason Pickelman	Dr. Gregory Smolarz
Dr. Joshua Wiggins	Dr. Jeffery DeHaan
Dr. Bradley Byrne	Dr. Christopher Payne
Dr. Mitchell Glass	Dr. Harold Weems
Dr. Glen Rountree	



Surgery Center of Northeast Texas

1902 Moores Lane, Suite B
Texarkana, TX 75503
Phone: (903) 792-2108

PATIENT NAME

PROCEDURE

SURGEON

DATE OF SURGERY

FOLLOW-UP APPOINTMENT

www.scnctx.com



Not just better care,
a better care experience

**SURGERY
CENTER** 
OF NORTHEAST TEXAS

INTRODUCTION

The doctors, nurses and staff of Surgery Center of Northeast Texas appreciate the confidence you have placed in us. You have chosen one of the finest facilities of its kind for your medical care and treatment.

Surgery Center of Northeast Texas is a state-of-the-art outpatient surgical facility providing a wide range of ambulatory procedures. Our goal is to provide high quality services in a comfortable and safe environment.

OUR PROCEDURES

Surgery Center of Northeast Texas is a freestanding, outpatient surgical facility dedicated to a broad range of surgical procedures. Our Center specializes in ophthalmology/ laser-assisted cataracts, general surgery, plastic surgery, oral surgery, orthopedics, sports medicine, ear, nose and throat, neuro surgery and urology. Our board-certified surgeons believe in giving you the personal attention you deserve.

FACILITY OFFERINGS:

- Medicare Certified
- AAAHC Accredited
- Board-certified surgeons
- Board-certified anesthesiologists
- Knowledgeable, highly-skilled, professional staff
- Convenient and affordable alternative to hospital-based surgery
- Convenient location with free parking
- Dependable and efficient service

OUR PROCEDURES

Surgery Center of Northeast Texas accepts most forms of insurance, including Medicare, Medicaid, and most commercial insurance plans. If your procedure is covered under Worker's Compensation, please be prepared to provide us with the necessary documentation. **Self-Pay** patients are also welcome at our center.

You are responsible for any balance not covered by your insurance. You will be notified in advance of your estimated financial responsibility, which will be due at time of service. If you are unable to pay, please alert the Central Billing Office (903-792-2108) ahead of time so that a payment plan may be discussed. We accept cash, check, and most major credit cards.

You will receive several bills as a result of your procedure at Surgery Center of Northeast Texas:

- Physician Fee
- Facility Fee
- Anesthesia
- Pathology

PRIOR TO YOUR PROCEDURE

1. Please arrange to have a responsible adult drive you to and from your procedure. The medications you receive will have sedative effects that slow your reflexes. You will not be able to drive the rest of the day, and should arrange to have a responsible party remain with you for 24 hours after the procedure. If you do not have someone with you, your procedure will be rescheduled.
2. We will call to remind you of your procedure and ask if you have any questions. We will also notify you in advance of your financial responsibility due at time of service.
3. Specific individual instructions from the physician's office will be given to you before you come to the center.
4. You must follow your physician's instruction regarding the preparation and any dietary modifications. **No food or drink of any sort after midnight the night before your procedure.**
5. A surgery center nurse will call to obtain your medical history and go over instructions. You will be given your arrival time 1-2 days prior to your procedure.
6. Wear comfortable clothing that is easy to take off and put on. Bring a jacket as it may be chilly.
7. Leave all jewelry and valuable at home. We are not responsible for lost items.
8. Bring your glasses and hearing aids with you (if applicable).
9. Bring your insurance card, driver's license and method of payment if applicable.
10. Bring your Advanced Directive paperwork (if applicable).
12. Please don't bring more than 2 visitors with you.
13. Children under the age of 13 are not allowed.

WHEN YOU ARRIVE

1. Please arrive on time and notify the receptionist of your arrival.
2. Forms will be available for completion upon arrival. All patients are asked to review and sign Admission Forms before their procedure to authorize the physician to perform it.
3. A Pre-Op Nurse will speak with you and record your vital signs, allergies and other patient information and get you ready for surgery.
4. Your surgeon and anesthesiologist will speak with you and answer any final questions you may have at this time.

5. An IV may be started so that we may give you intravenous medication. This medication will help you to relax and feel more comfortable.
6. Your responsible party may wait in our waiting room.

AFTER YOUR PROCEDURE

You will rest for a short time in our Recovery Area before discharge. The physician will review his/her findings and will give you verbal and written discharge instructions particular to your procedure/surgery.

You may feel the effects of the sedation after your procedure, so please follow these simple safety guidelines:

- Do not drink alcoholic beverages
- Do not drive or operate machinery
- Do not make any important decisions... until the following morning

Ensure you are accompanied by a responsible party for 24 hours post-procedure. The physician's office will contact you regarding any pathology results from your procedure, if applicable.

If at any time at home you feel difficulty breathing, chest pain, excessive bleeding or vomiting, go to the emergency room or call 911.

PATIENT RIGHTS

EVERY PATIENT HAS THE RIGHT TO BE TREATED AS AN INDIVIDUAL AND TO ACTIVELY PARTICIPATE IN AND MAKE INFORMED DECISIONS REGARDING HIS/HER CARE. THE FACILITY AND MEDICAL STAFF HAVE ADOPTED THE FOLLOWING PATIENT RIGHTS AND RESPONSIBILITIES, WHICH ARE COMMUNICATED TO EACH PATIENT OR THE PATIENT'S REPRESENTATIVE/SURROGATE PRIOR TO THE PROCEDURE/SURGERY.

PATIENT RIGHTS

TITLE 25 Part 1 Chapter 135 Subchapter A Rule 135.5 (effective June 18, 2009) 34 TexReg 3948

- Patients shall be treated with respect, consideration, and dignity.
- Patients shall be provided appropriate privacy.
- Patient records shall be treated confidentially and, except when authorized by law, patients shall be given the opportunity to approve or refuse their release.
- Patients shall be provided, to the degree known, appropriate information concerning their diagnosis, treatment, and prognosis.

When it is medically inadvisable to give such information to a patient, the information shall be provided to a person designated by the patient or to a legally authorized person.

- To be informed of their right to change providers if other qualified providers are available.
- Patients shall be given the opportunity to participate in decisions involving their health care, except when such participation is contraindicated for medical reasons.
- Information shall be available to patients and staff concerning:
 - Patients' rights
 - Patient conduct and responsibilities
 - Services available at the Center
 - Provisions for after-hours and emergency care
 - Fees for services
 - Payment policies
 - Patient's right to refuse to participate in experimental research
 - Methods of expressing complaints and suggestions to the Center
- Marketing or advertising regarding the competence and/or capabilities of the organization shall not be misleading to patients.

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