PRE-OPERATIVE INSTRUCTIONS

1) If you are on regularly required medications, continue taking them as prescribed, unless otherwise instructed.

2) Eat or drink normally, unless otherwise instructed.

3) Have an icepack on hand in your freezer for post-operative swelling.

4) Arrange for transportation to take you home after the surgery is completed unless driving yourself has been previously permitted by your doctor.

5) In most cases a special post-operative shoe will be dispensed to be worn on the affected foot.

6) If questions arise regarding your surgery and/or anticipated recuperation, please contact the office as soon as possible to speak with the nurse or physician.

7) A prescription will be issued the day of the surgery to reduce possible discomfort after the surgery.

8) A pre-operative antibiotic may be given the day of the surgery at the discretion of your physician.

9) You may request oral Valium to be given at time of surgery to alleviate anxiety. Approval will be at the discretion of the doctor. Please let us know if you would like this option available to you.

10) You have the option of being prescribed EMLA cream which is a topical anesthetic to help decrease skin sensation prior to the injections to numb the foot. This is to be applied thickly all around the sides and front of the ankle 2 hours before arrival. It is not necessary to apply it to the foot itself. Cover the area with saran wrap when finished. Wear gloves during the application and do not rub it in.
Patient Rights

You are receiving this notice of rights with the expectation that it will contribute to a more effective patient care experience at the Surgery Center. We want our patients to feel confident in the health services they will be receiving and to take an active role in their care.

As a Patient at the Coeur d'Alene Foot & Ankle Surgery Center, you have a right to:

- Be fully informed about a treatment or procedure and the expected outcome before it is performed. The Coeur d'Alene Foot & Ankle Surgery Center will provide the patient or patient’s representative the information needed in order to make "informed" decisions regarding his/her care and the patient's participation is encouraged.

- Personal privacy during personal hygiene activities during medical/surgical treatments, and when requested as appropriate.

- Receive care in a safe setting, with the ASC meeting all Medicare Accreditation Standards.

- Be free from all forms of abuse or harassment. The CDA Foot & Ankle Surgery Center will prohibit all forms of abuse, neglect and harassment and any forms of prejudice from staff, other patients, or visitors and ensure you considerate and respectful care.

Confidentiality of Health Information. (See attached CDA Clinic / ASC HIPAA Policy)

Although all surgical procedures performed at the Coeur d'Alene Foot & Ankle Surgery Center are done under local anesthetic without IV Sedation, and therefore present very little risk to life safety, you have a right to: Emergency Services if a patient’s health is in serious danger and an Advance directive (such as a living will, care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the ASC will honor the intent of that directive to the extent permitted by law and ASC policy. (Available upon request)

Voice complaints and receive a fair, fast, and objective review of any complaint you have concerning your doctors and other health care personnel. This includes complaints about waiting times, operating hours, and the adequacy of the health care facility. Complaints may be directed to: the Web site for the Office of the Medicare Beneficiary Ombudsman. http://www.cms.hhs.gov/ombudsman/resources.asp and/or Surveyor at the Bureau of Facility Standards E-mail: fsb@dhw.idaho.gov Office Phone (208) 334-6626 PO Box 83720, Boise, ID 83720-0036

The Coeur d'Alene Foot & Ankle Surgery Center is under the ownership of ASC physicians.

Signing the Coeur d'Alene Foot & Ankle Surgery Clinic / Center HIPAA Policy information sheet acknowledges receipt of written Notice of Patient Rights.
Patients (Non-Medicare) with Insurance

Dear Patient,

If surgery is required to correct a foot problem, **check with your insurance company before your surgery appointment.** It is your responsibility to know your insurance benefits. Also, check if preauthorization is required or a second opinion is needed. We will supply you with any information you may need upon your request.

There will be **two claims** sent to your insurance company. When calling your insurance company please check with them in regards to both of your billings. One will be for the doctor performing the surgery and the other will be for the surgery center itself, which is a separate certified ambulatory surgical center (ASC). Fees include the rental of the surgical suite, the services of the Registered Nurses, and the supplies that are used during the surgery.

After your insurance company pays their portion and we have written off any disallowed portions of your bill, you are responsible for the remaining balance. If you have a balance in both facilities, **please make two separate payments:** one for the **doctor** that performed the surgery and the other to **CDA Foot & Ankle Surgery Center**.

If you have any questions or concerns please contact our office.