Lindenhurst Surgery Center, LLC
1050 Red Oak Lane, Lindenhurst, IL 60046
847-356-4710

Conveniently located on the Lindenhurst medical campus at the southeast corner of Deep Lake Road and Grand Avenue.

*It is your responsibility to read this literature as it contains important information.*
Welcome to Lindenhurst Surgery Center, LLC

You and your doctor have discussed and decided that you require surgery. This booklet will help you answer your questions and provide you with necessary information about your upcoming procedure. It will guide you through pre-op (before surgery) and post-op (after surgery) care. Knowing what to expect will help alleviate fear and make you more comfortable. This booklet also provides you with the information we are required to make available to you as mandated by state and federal authorities.

We care about your questions and concerns. Please feel free to discuss them with the health care team at Lindenhurst Surgery Center.

Date of surgery: ______________________________________

Arrival time: ______________________________________

Day of surgery checklist:

☐ Photo ID & Insurance Card(s)

☐ List of all medications, vitamins or supplements you are taking

☐ List of allergies

☐ Responsible adult to drive you home (no taxis or buses)

☐ Removed all jewelry

Other important instructions/notes: ________________________

____________________________________________________________________

Date & time of follow up appointment: ________________________

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Your Experience at Lindenhurst Surgery Center, LLC

You are going to have same-day surgery (also called ambulatory or outpatient surgery). Lindenhurst Surgery Center provides high quality patient focused care. From the time you come through our doors until you leave, you will appreciate the quality and professionalism that our expertly trained team provides. We work hard to make each and every patient feel comfortable and at ease.

As a patient, you are expected to be respectful of all healthcare providers and staff as well as other patients. If you have any questions, do not hesitate to contact us before your upcoming procedures.

Prior to Your Day of Surgery

A Lindenhurst Surgery Center staff member will be in contact with you prior to your date of surgery, or you may call 847-356-4710 with any questions or concerns. The Lindenhurst Surgery Center reception desk is available for service from 7 a.m. to 4 p.m., Monday through Friday. The office is closed on weekends and holidays. A pre-surgery health assessment will be discussed. You also can expect a call the day prior to your surgery informing you of your arrival time for your procedure. You may receive more than one call prior to surgery, but we make every effort to try and minimize any inconvenience.

Please bring the following with you on the day of your surgery:

- Valid photo ID
- Insurance cards
- Licensed driver to take you home
- List of all medications, vitamins or supplements you are currently taking
- List of any known allergies

All deductibles, co-pays or co-insurance payments are due at time of service. Lindenhurst Surgery Center accepts all major credit cards, check or cash.

Preparing for Surgery

1. Depending on your medical history, some tests may need to be done before surgery. You will be notified ahead of time by a member of your health care team if any additional tests are required. If the doctor requires you to have lab tests, EKG, and/or X-rays before surgery, we encourage you to have the tests completed within one (1) week of your surgery date.
2. If you take regular medications, ask your healthcare provider if you should take them before surgery. If instructed to, take the medications with a small sip of water.
3. A staff member will call you before your procedure with instructions and arrival time. Arrival time is when you are expected at Lindenhurst Surgery Center, not the start time of your procedure.
4. Arrange for a responsible adult to drive you home after surgery and stay with you afterward, as needed. This person should also be prepared to stay at the facility during your procedure.
5. 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.
6. If you smoke or use other tobacco products, quit or cut down a few weeks before surgery. Your healthcare provider may give you specific instructions.
7. Follow any other instructions you are given.
8. Tell your doctor about other medical problems you may have. Health problems such as allergies, diabetes, and obesity could affect your surgery and your treatment.
9. Do not shave near where you will have surgery. Shaving with a razor can irritate your skin and make it easier to develop an infection.
10. To cancel your procedure, we ask that you notify us at least 24 hours in advance.
Before and After Surgery

1. Your nurse will check your temperature, pulse, respiration and blood pressure; and will verify your health history given to the nurse over the phone. You will be asked to sign consent forms. Pre-operative medications may be given at this time. You will be asked to change into a gown.

2. If your doctor has ordered tests that have not already been completed, they will be performed, provided that test is available at the center.

3. Your anesthesiologist will review your medical history and your test results (if applicable), and meet with you.

4. You may choose to have your family join you upon completion of the nursing assessment.

5. Parents will remain with children until the time of surgery.

6. When it is time for surgery, you will be taken to the operating suite by a surgical nurse and by an anesthesia care provider. The amount of time in surgery depends on your particular procedure.

7. After surgery you will go to the recovery room. The nurses will monitor your recovery and care for you until your condition allows for your family/friend to join you.

8. It is recommended your family/friend remains in the building. Please have them notify staff if they will be leaving the building.

9. Make sure that your healthcare providers clean their hands before examining you, either with soap and water or an alcohol-based hand rub. If you do not see your providers clean their hands, please ask them to do so.

10. Family and friends who visit you should not touch the surgical wound or dressings.

11. Family and friends should clean their hands with soap and water or an alcohol-based hand rub before and after visiting you. If you do not see them clean their hands, ask them to clean their hands.

Discharge

1. When your condition meets the discharge criteria for your physician and the center, you will be prepared for discharge. Your nurse will review home care instructions with you and your family/friend.

2. It is important to review and understand the information given to you in regards to the following:
   - Diet
   - Activity
   - Medications
   - Dressings
   - Pain
   - Follow-up Visits
   - Returning to Work
   - Shower or Bathing
   - Lifting

3. Due to the effects of anesthesia, you should not drive a car, operate machinery, make important decisions or drink any alcoholic beverages for 24 hours following surgery.

Questions? Please contact your physician or Lindenhurst Surgery Center.

FOR YOUR SAFETY, A FAMILY MEMBER OR FRIEND MUST DRIVE YOU HOME.

Surgical Site Infections (SSI)

A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Most patients who have surgery do not develop an infection. However, infections develop in about 1 to 3 out of every 100 patients who have surgery. Some of the common symptoms of a surgical site infection are redness and pain around the area where you had surgery, drainage of cloudy fluid from your surgical wound, and fever.

Most surgical site infections can be treated with antibiotics. The antibiotic given to you depends on the bacteria (germs) causing the infection. Sometimes patients with SSIs also need another surgery to treat the infection.
At Home After Your Surgery

It is very important that you follow your home care instructions. Call your doctor for any questions or problems.

If you received general anesthesia, regional block, or IV sedation, you will need someone to drive you home and stay with you. Due to the effects of anesthesia, you should not drive a car, operate machinery, make important decisions or drink any alcoholic beverages for 24 hours following surgery.

• Before you go home, your doctor or nurse should explain everything you need to know about taking care of your wound. Make sure you understand how to care for your wound before you leave the hospital.
• Always clean your hands before and after caring for your wound.
• Before you go home, make sure you know who to contact if you have questions or problems after you get home.
• If you have any symptoms of an infection, such as redness and pain at the surgery site, drainage, or fever, call your doctor immediately.

Be sure to schedule a post-operative appointment with your surgeon. A nurse from the center will contact you after your surgery to see how you are feeling and to address any questions or concerns. We want to make sure that your recovery progresses well and that you are totally satisfied with our services.

In the event you need to contact us and it is NOT an emergency, please call 847-356-4710 during normal business hours, 7 a.m. – 5 p.m. Monday through Friday or contact your surgeon. If it is an emergency call 911 or go to the nearest Emergency Room (ER). Lindenhurst Freestanding Emergency center is conveniently open 24 hours a day seven days a week and is also located on the Lindenhurst Medical Campus.

We want to make sure we are providing great patient care at all times; Please make sure to complete and mail the survey you were given at the time of your discharge. If you have any additional comments or concerns regarding your visit, please contact our Director of the Lindenhurst Surgery Center at 847-356-4701. Thank you for choosing Lindenhurst Surgery Center, LLC!

Notice of Patient Rights and Responsibilities

We believe that patients who understand and participate in their treatment achieve better results. This document is meant to inform our patients of their rights and responsibilities while undergoing medical care. To the extent permitted by law, patient rights may be delineated on behalf of the patient to his or her guardian, next of kin, or legally authorized responsible person if the patient:

• Has been adjudicated incompetent in accordance with the law,
• Is found to be medically incapable of understanding the proposed treatment or procedure,
• Is unable to communicate his or her wishes regarding treatment, or
• Is a minor.

If there are any questions regarding the contents of this notice, please notify any staff member.

Patient Rights

1. **Access to Care.** You will be provided with impartial access to treatment and services within this practice’s capacity, availability, and applicable law and regulation. This is regardless of race, creed, sex, national origin, religion, disability/handicap, source of payment for care/services and any other legally prohibited reasons. You have the right to participate in the plan of care and pain management. You also have the right to choose the physicians or other clinicians who will be providing care or treatment, as well as have information about them.

2. **Respect and Dignity.** You have the right to receive care in a safe and dignified environment, free from all forms of abuse, neglect, harassment and/or exploitation. You have the right to reasonable responses to reasonable requests of service and to formulate advanced directives and have staff and/or practitioners comply with those directives. You have the right to protection and respect of your rights if you are participating in a human research clinical trial.
3. **Privacy and Confidentiality.** You have the right, within the law, to personal and informational privacy. This includes the right to:
   a. Privacy regarding medical care
   b. Receive a Notice of Privacy Practices
   c. Request privacy protection
   d. Access protected health information in a reasonable time frame
   e. Amend protected health information
   f. Request an accounting of disclosures of protected health information
   g. Request and receive itemized detailed explanations of any billed services, regardless of the source of payment for care provided

4. **Personal Safety.** You have the right to expect reasonable safety concerning the center and environment, free from any forms of restraint or seclusion as a means of convenience, discipline, coercion or retaliation; the least restrictive restraint or seclusion should be used only when necessary to ensure patient safety.

5. **Identity.** You have the right to know the identity and professional status of any person providing services and which physician or other practitioner is primarily responsible for care.

6. **Information and Communications.** You have the right to obtain complete and current information concerning diagnosis (to the degree known), treatment, and any known prognosis. This information should be communicated in terms that you understand. If you do not speak or understand the predominant language of the community, you should have access to an interpreter.

7. **Consent.** You have the right to information that enables you, in collaboration with the physician, to make treatment decisions. Receiving information in easy-to-understand terms will allow for an informed consent or refusal of the treatment or procedure.
   a. Consent discussions will include explanation of the condition, risks and benefits of treatment, as well as consequences of no treatment.
   b. You will not be subjected to any procedure without providing voluntary, written consent.
   c. You will be informed if the practice proposes to engage in research or experimental projects affecting its care or services. If it is your decision not to take part, you will continue to receive the most effective care the practice otherwise provides.

8. **Consultation.** You have the right to accept or refuse medical care to the extent permitted by law. However, if refusing treatment prevents the practice from providing appropriate care in accordance with ethical and professional standards, your relationship with this practice may be terminated upon reasonable notice.

9. **Visitors and Notifications.** You have the right to have a family member or representative of your choice and your own physician notified promptly of your admission to the hospital (if applicable). You also have the right to consent to receive the visitors whom you designate, including but not limited to a spouse, a domestic partner (including a same sex domestic partner), another family member, or a friend. You may withdraw your consent to receive any visitor at any time. To the extent this center places limitations or restrictions on visitation; you have the right to set any preference of order or priority for your visitors to satisfy those limitations or restrictions. This center does not and will not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability. This center will ensure that the visitors chosen by you will be able to enjoy full and equal visitation privileges, consistent with your preferences.

10. **Rules and Regulations.** You will be informed of practice rules and regulations concerning your conduct as a patient at this facility. You are further entitled to information about the initiation, review, and resolution of patient complaints.
Patient Responsibilities

You are responsible to:

• Provide accurate and complete information concerning your present medical condition, past illnesses or hospitalization and any other matters concerning your health.
• Tell your caregivers if you do not completely understand your plan of care and voice concerns regarding your plan of care including pain management.
• Follow all medical center policies and procedures while being considerate of the rights of other patients, medical center employees and medical center properties.
• Follow the caregivers’ instructions and recommendations of your physician and tell your care provider if you are concerned or not able to follow them.
• Accept the consequences and understand the outcome if you choose not to follow the advice of your physician.
• Tell your care provider if you have an unexpected change in condition, side effects from medication, your pain is not relieved, or you feel that your care is not going the way that you feel it should.
• Adhere to the Center’s policies and regulations, including the non-smoking policy.
• Be respectful of other patients, employees and property.
• Provide the Center with accurate information regarding payment and pay your portion in a timely manner.
• Provide us with suggestions to ensure we meet your needs and expectations.

The nursing staff is committed to providing comfort for all patients. Please let your nurses know how we can effectively reduce or eliminate your pain or anxiety.

Grievance Process

Regarding problem resolution, you have the right to: Express your concerns about patient care and safety to hospital personnel and/or management. To report or file a patient care complaint, please call our Patient Relations Director at 847-360-4071. If your complaint is not resolved to your satisfaction, you may file a complaint with the Illinois Department of Public Health at 1-800-252-4343.

To report or file concerns regarding laboratory operations or testing, please contact our Laboratory Services Director at 847-360-2606. If your complaint is not resolved to your satisfaction, you may file a complaint with the Centers for Medicare & Medicaid Services (CMS) Central Office, Division of Laboratory Services (CLIA), in Baltimore, Maryland at 410-786-3531, or locally at 1-877-267-2323 (toll free), extension 63531.

You also have the right to: Lodge a concern with the state, whether you have used the hospital’s grievance process or not. If you have concerns regarding the quality of your care, coverage decisions or want to appeal a premature discharge, contact the State Quality Improvement Organization (QIO), the Illinois Foundation for Quality Health Care at 1-800-647-8089. If your concerns and questions cannot be resolved at this level, you may contact The Joint Commission at 1-800-994-6610, by fax at (630) 792-5636, by e-mail complaint@jointcommission.org or by mail: Office of Quality Monitoring - The Joint Commission One Renaissance Boulevard Oakbrook Terrace, IL 60181.
Healthcare Directives

If you need assistance with Advance Directives, you should talk with your personal lawyer or representative for advice and assistance in this matter. The Illinois Department of Public Health attorneys or its personnel cannot give you legal advice concerning living wills or advance directives.

Lindenhurst Surgery Center, LLC, recognizes the need for patients to make decisions regarding the healthcare they receive. Lindenhurst Surgery Center’s policy states that if you have an Advance Directive (DNR/Do Not Resuscitate), you must inform us. If you have an Advance Directive you will need to discuss your wishes with your physician. If you decide to suspend (not continue) your advance directive your procedure will proceed as scheduled and documentation of this decision will be placed on your chart. If you decide you do not wish to suspend your advance directive you and your physician will need to reschedule your procedure at the hospital. The following healthcare directives shall be honored: Appointment of a Health Care Representative and Durable Power of Attorney.*

Illinois Notice to Patients Required by the Patient Self Determination Act ("PSDA")

The Department of Public Health is required to make available a uniform advance directive for a do-not-resuscitate order that may be used in all settings, the statutory Living Will Declaration form, the Illinois Statutory Short Form Power of Attorney for Health Care, the statutory Declaration of Mental Health Treatment Form, and the summary of advance directives law in Illinois. (Section 2310-600 of the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois, 20 ILCS 2310-600).

In addition, federal legislation (Patient Self-Determination Act, 42 U.S.C.A. § 1396a[w] [West 1996]) requires certain providers participating in the Medicare and Medicaid programs to furnish patients with information on advance directives. The information is to be given to patients upon admission to a facility or when provision of care begins. Providers covered by this requirement include the following entities: hospitals, nursing facilities, providers of home health or personal care services, hospice programs and health maintenance organizations.

*NOTE: If you have chosen to suspend your advance directive (DNR/Do Not Resuscitate) during your visit to Lindenhurst Surgery Center, LLC, in all instances of emergency or life threatening situations intra-operatively (in the operating room) and during the peri-operative period (admissions, prep, recovery and discharge), life sustaining treatment (including resuscitative services) will be instituted and transfer to a higher level of care will occur.

Frequently Asked Questions

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 treatments you want and do not 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 is a good idea to name a second choice, too, just in case the first person is unwilling or unable to act if the time comes.
Where can I get a patient advocate designation form?
Many Illinois hospitals, health maintenance organizations, nursing homes, homes for the aged, hospice and home health care agencies make forms available to people free of charge. Many senior citizens’ groups, churches and civic groups do, too. You can also get a free form from various members of the state legislature. Many lawyers also prepare Patient Advocate Designations for their clients. The forms are not all alike. You should choose the one which best meets your situation.

How do I sign a patient advocate designation form so that it is 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 is not as simple as it sounds, because under this law, some people cannot be your witnesses.

Your spouse, parents, grandchildren, children, and brothers and 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 health care to you from being a witness to your signature. It is easier to make a Patient Advocate Designation before you become a patient or resident of a healthcare facility or agency. Friends or co-workers are often good 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 make a decision about my future medical treatment?
No. You do not have to fill out a Patient Advocate Designation, and you do not 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 have made sure that your family and friends know what you would want, they will 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 do not, 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 can also 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 any healthcare facility about their treatment policies and procedures to be sure you understand them and how they work. Many facilities and agencies have staff available who can answer your questions. Additional materials may be available from your State Representative or Senator.

Do I have to give my patient advocate private instructions?
No. A Patient Advocate designation can be used just to name your Patient Advocate, the person you want to make decisions for you. Written instructions are generally helpful to everybody involved. 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.
Financial Information

Procedure Billing
We want to make payment of your account convenient for you by billing your insurance carrier on your behalf. To make this possible, it is necessary for you to supply us with your current insurance information. Depending on your insurance carrier benefits, coverage will be verified with the carrier prior to your procedure. You will be responsible for any co-pays and/or deductibles, and these are payable at the time of surgery.

Outstanding balances over 90 days will be turned over to a collection agency. In an effort to protect your identity, a copy of your photo I.D. and insurance card will be placed in your medical record at the time of registration.

Please contact Lindenhurst Surgery Center billing office for any questions at 1-800-826-3784 Monday through Friday, 8:30 a.m.-5:00 p.m. cst.

Anesthesia Billing
Your anesthesia will be administered by a board certified Lake County Anesthesia anesthesiologist or by a Lake County Anesthesia registered nurse anesthetist (CRNA) under the direct supervision of a Lake County Anesthesia anesthesiologist. Depending on your insurance provider, you may receive two separate bills for the anesthesia services, one for the physician anesthesiologist and one for the CRNA.

PLEASE NOTE: If you receive two separate bills, the total amount would be the same if you had only received one bill. The determining factor for the number of bills you may receive is based upon your insurance carrier’s requirements. You insurance carrier recognizes professional anesthesia services and may require separating CRNA billing from anesthesiologist billing. Both professionals delivered care during your visit. Furthermore, the total amount is the same whether the anesthesia is administered by a care team or by a single provider.

Please direct any anesthesia billing inquiries to Lake County Anesthesia at 1-847-615-2200.

Additional Billing
You may receive additional bills from Radiology, Laboratory or Pathology services if your surgical procedure required imaging, biopsy or diagnostic lab evaluation.

Additional Information
Your Physician may be an investor, own shares, have a financial interest and perform surgery at Lindenhurst Surgery Center.

Lindenhurst Surgery Center, LLC, is licensed by the Illinois Department of Public Health.

About Our Staff
- Patients ranked their satisfaction with the quality of care and services received and courtesy and friendliness of the nurses who cared for them in the 99th percentile when compared nationally.*
- 100% board certified or board eligible physicians.
- Dedicated Medical Director.
- Registered Nursing Staff assigned to patient care.
- All staff receives in-service training for new technology and treatments.
- Licensed clinical staff are ACLS and PALS certified.
- Director on site.

*Lindenhurst Surgery Center, LLC has earned The Joint Commission’s Gold Seal of Approval™ for accreditation by demonstrating compliance with The Joint Commission’s national standards for health care quality and safety in ambulatory care organizations. The accreditation award recognizes Lindenhurst Surgery Center, LLC’s dedication to continuous compliance with The Joint Commission’s state-of-the-art standards.

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