



WOODLAND
SURGERY CENTER LLC

Surgery Information

2325 N. Casaloma Drive
Appleton, WI 54913

920.730.8833 • 888.383.3039

www.handtoshoulderwisconsin.com

LANGUAGE ASSISTANCE SERVICES

ATTENTION: If you speak English or one of the following languages, assistance is available to you free of charge. Please ask for assistance from a staff member or call 1-888-383-3039.

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-383-3039.

Hmong: LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-888-383-3039.

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 1-888-383-3039。

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-888-383-3039.

Arabic: ملحوظة: إذا كنت تتحدث انكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-888-383-3039

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-888-383-3039.

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-888-383-3039 번으로 전화해 주십시오.

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-383-3039.

Dutch: AANDACHT: Als u Nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-888-383-3039.

Lao: ໂປດຊາບ: ຖ້າວ່າທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໄດຍບໍ່ເສື່ອຍ ຈະມີ ພ້ອມໆ ສະໜອງ ທ່ານ. ໂທ 1-888-383-3039.

French: ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-888-383-3039.

Polish: UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-888-383-3039.

Hindi: ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-888-383-3039.

Albanian: KUJDES: Nëse fliitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-888-383-3039.

Tagalog – Filipino: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulung sa wika nang walang bayad. Tumawag sa 1-888-383-3039.

STATEMENT OF NONDISCRIMINATION

ENGLISH

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

SPANISH

Woodland Surgery Center cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

HMONG

Woodland Surgery Center ua raws cov kev cailij choj yuam siv ntawm Tsom Fwv Nrub Nrab Teb Chaw hais txog pej xeem cov cai (Federal civil rights laws) thiab tsis ciav-cais leejtwg vim nws hom neeg, nqaij tawv, lub tebchaws tuaj, hnub nyoog, kev tsis taus, los yog poj niam txiv.

Woodland Surgery Center
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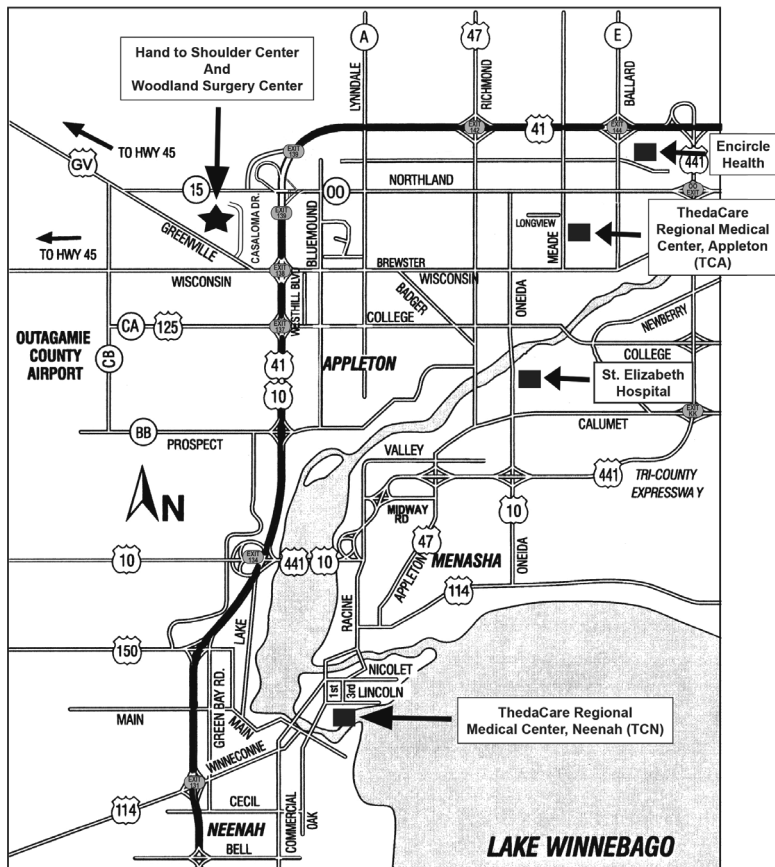
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Welcome To Woodland Surgery Center



We understand that preparing for surgery may cause you some concern or anxiety. Our goal is to make your experience a positive one and to provide you with the best care possible.

This pamphlet will help you prepare for your surgery and answer many questions you may have. Please take time to thoroughly read and follow the instructions carefully. **If you have any questions, please feel free to call Hand to Shoulder Center of Wisconsin at 920.730.8833.**

Out of respect for your privacy, we offer walled cubicles for preoperative care and recovery.

Important Surgery Information

Arrival Date and Time

Arrival Date:_____

Arrival Time:_____ **To be determined**

Please be aware this is your arrival time and understand that your surgery time is an ESTIMATED time. We do our best to stay on schedule, but on occasion there may be an emergency add-on case or something that comes up in surgery that needs to be addressed and may prolong your wait.

We appreciate your patience.

IMPORTANT: Remember to follow all your surgeon's instructions when you return home and keep all scheduled appointments with your surgeon.

Important Check List

Before Surgery

Failure to follow instructions may cause your surgery to be rescheduled.

- A Pre-Surgical History and Physical Examination (H&P) may be requested to be performed by your primary doctor. See your surgical instructions if H&P is required. If required, this H&P must be done within 30 days of surgery or as recommended by your surgeon's nurse.
- Verify your insurance carrier has approved your surgery. If you are not sure, call your insurance company or check with your surgeon's office.
- Complete the Medication Reconciliation Form.
- Do not eat or drink anything (this includes water, chewing gum, chewing tobacco and hard candy) after midnight the evening before your surgery unless otherwise instructed by your surgeon. Please refrain from drinking alcohol, smoking marijuana or consuming cannabis products (including gummies or edibles) 24 hours prior to your procedure.
- If you take a GLPI Medication (examples:Trulicity, Byetta, Ozempic,Victoza, Saxenda,Adlyxin, Rybelsus, Bydureon) you must follow a CLEAR LIQUID DIET FOR 24 HOURS PRIOR TO SURGERY.
 - Clear Liquids include black coffee without cream or sugar, tea, juice, or broth.
- **Please call your surgeon if you develop any of the following prior to surgery:**
 - **A cold, sore throat, fever, flu or another illness**
 - **A cut, scrape, rash or skin condition that occurs near the site of surgery**
- If you are taking aspirin, ibuprofen, Coumadin or another blood thinner, vitamins or herbs, you will be given instructions by your surgeon or primary care doctor regarding these medications prior to surgery.
- If you take any GLPI Medications (examples:Trulicity, Byetta, Ozempic,Victoza, Saxenda,Adlyxin, Rybelsus, Bydureon) you will be given instructions by your surgeon or primary care doctor regarding these medications prior to surgery.
- POA or Living Will has been discussed.
- Do not schedule dental procedures or a colonoscopy for at least 2 weeks prior to or after your surgery date.

Day of Surgery

Before Surgery

Leave all valuables including jewelry, money, credit cards, checkbooks, etc. at home.

Remove rings and jewelry from both hands.

Do not wear any cosmetics to the surgery center (e.g. lipstick, mascara, eye shadow and nail polish).

If you wear contact lenses, be sure to bring the storage case and all care and use items with you.

Bring in COMPLETED Medication Reconciliation Form.

Medications: refer to Pre-op Orders as instructed by your surgeon's nurse unless instructed differently by your primary care doctor.

If using an inhaler and/or insulin, please bring along with you to surgery.

Please shower or bathe the evening before or the morning of surgery.

You may brush your teeth, but be careful not to swallow any water or toothpaste.

Wear loose, comfortable clothing.

Patients who are diabetic should check sugars frequently leading up to surgery to prevent hyperglycemia and hypoglycemia.

Arrival and Discharge

Day of Surgery

Patients are instructed by their nurse when to arrive for surgery (please note, your arrival time is not your surgery time). For first arrivals, the doors open after 6:15AM

Check-in with the receptionist - surgical release forms will be reviewed and signed. Patient's Pain Medication Policy will be reviewed and signed (see policy on page 8 - 9).

When the registered nurse takes you to be admitted for surgery, one or two family members may stay with you until you leave for the operating room. While you are in surgery, your family may wait in the waiting room and your doctor will speak with them after the surgery is complete. WI-FI is available in our waiting area.

Your anesthesia provider will see you before you enter the operating room.

You will be given a gown to wear. Your belongings will be placed in a small bag and stored in the postoperative area.

Your blood pressure, pulse and temperature will be checked and you will be asked to empty your bladder. An IV will be started by a registered nurse or anesthesiologist.

When it's time for your surgery, you will be taken to the operating room. EKG patches will be placed on your chest and a blood pressure cuff on your arm. A clip put on your finger will measure your oxygen level. Your anesthesia provider will give you medication through your IV that will make you drowsy and allow you to drift off to sleep.

Arrival and Discharge

Day of Surgery (continued)

After resting for a while, you will be given fluids to drink and your family will be able to see you. If needed, pain medication will be given. Before going home you will be given both oral and written discharge instructions. Your coordination, judgment and ability to react may be impaired for a time after surgery. You should not drive a motor vehicle for 24 hours unless otherwise instructed by your surgeon.

When you are ready to go home you will be discharged to the care of a responsible adult.

Refrain from smoking to optimize your healing process.

Do not consume alcoholic beverages when taking prescription pain medication.

Do not drive if taking prescription pain medication.

IMPORTANT: A registered nurse will call you the day after your surgery to see how you are doing. If you have questions, please call your surgeon.

PAIN MANAGEMENT

Pain Medication Policy

Hand to Shoulder Center of Wisconsin recognizes that appropriate pain management is an important part of your surgical and recovery process. It is therefore important that you are aware of our policies regarding dispensing prescriptive, including narcotic, medications.

This clinic does not routinely prescribe pain medications in anticipation of surgery. Following surgery, you will be discharged with an appropriate prescription depending on the complexity of your surgery or injury.

The amount of narcotic pain medication prescribed is related to your surgical procedure or injury and is only one part of your pain management program. Other important elements of pain control include nonsteroidal anti-inflammatory agents (NSAIDS: ibuprofen, naproxen, Celebrex, aspirin), ice, elevation and rest. Your ability to use NSAIDS may be altered depending on other health conditions and should be discussed with your surgeon. NSAID use is discouraged with some procedures.

Our surgeons will manage your postoperative pain following your surgery depending on the type of procedure done. If you have a history of chronic pain, consulting with a pain clinic, physical therapist or pain psychologist may be considered. If you have been receiving narcotic pain medication from another physician prior to your surgery or injury, you may need to return to that physician for further medical management.

RISKS of Narcotic Medications

We are concerned about your overall health and the potentially negative effects of narcotic medications on it. In addition to lack of effectiveness for some types of pain, the side effects of narcotic use include nausea, constipation, upset stomach, sexual dysfunction, depression, fatigue, increased sensitivity to pain, addiction, and drug tolerance.

Pain Management

Pain Medication Policy (continued)

Refill Policy for Prescriptions

We **DO NOT** provide narcotic prescription refills between the hours of 5:00 P.M. and 8:00 A.M., weekends or holidays. If you need your prescription refilled, please notify the surgeon during your clinic visit or call Monday - Friday during regular business hours. Clinic business hours are Monday - Friday, 8:00 A.M. - 5:00 P.M. Calls received late in the day may not be addressed until the following day.

Slush Pack

Recommendation

1. Mix 1 part alcohol with 2 parts of water.



2. Place in ziplock freezer bag. Place that bag into another ziplock bag.



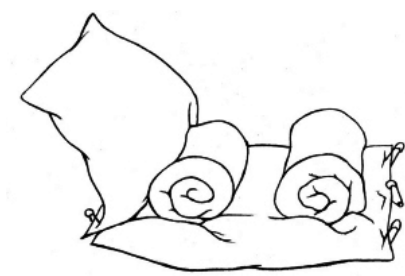
3. Place in freezer, lying flat.
4. Place ice pack on the affected area as needed.
DO NOT place pack directly on skin.
5. Return pack to freezer for safe storage.

Pain Management

Recommendations after Hand Surgery

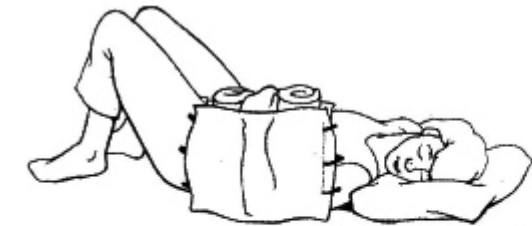
Sleeping Positions

(This protocol does not apply to shoulder surgery.)



To maintain elevation of the hand while sleeping, use two standard sized pillows, six to eight large safety pins and two rolled up bath towels.

The forearm is placed between the bath towels inside the two pillows.



You will be able to sleep on your back or on your side hugging the pillows.



Pain Management

Recommendations after Shoulder Surgery

Sleeping Positions



After surgery, wearing your sling or protective device is strongly advised unless otherwise directed by your doctor or therapist. Sleeping in a recliner, couch or propping your surgical side up with pillows in bed will help decrease pain and pressure to your surgical site. Placing a towel roll under your elbow may also help to decrease pain and pressure to your surgical site.

As an alternative position, sleeping on the opposite shoulder may be helpful. Place a pillow behind your back to add support and a pillow under your elbow to support your arm.



Washing Instruction



Hygiene is important. Without the ability to lift the surgical arm, normal cleansing routines may be difficult. Simply remove the sling and lean over a sink to cleanse the underarm and surrounding area of the surgical arm.

Pain Management

Recommendations after Shoulder Surgery

Utilizing Your Sling (protective device)

The overall purpose of a sling is to protect and support your arm to minimize stress on your shoulder joint after surgery. Wearing your sling after surgery is strongly advised unless otherwise directed by your doctor or therapist. It should not cause additional pain to your arm or shoulder.

When wearing your sling, your shoulders should be level and your elbow bent to 90 degrees. Your elbow should be positioned all the way back in the sling. The padded part of the shoulder strap should be resting between your neck and shoulder on the non-operated side. If your sling has an abduction pillow, the pillow should be positioned between your body and your arm. If you should have questions about your sling have your therapist adjust it for you.

Forbidden Activities After Shoulder Surgery (unless otherwise directed by your doctor or therapist)

- Large pendulum movements: keep it to the size of a basketball with your surgical arm
- Lifting a glass of water with surgical arm
- Active motion with surgical arm
- Passive extension and behind-the-back internal rotation
- Letting arm hang to side with no sling
- Lifting objects greater than one pound
- Washing back with surgical arm
- Brushing teeth with surgical arm
- Incorporating surgical arm with driving
- Slump sitting

Thinking Ahead

After Surgery

There are many things that most people take for granted that become difficult or impossible to do single-handedly. As you plan ahead for surgery with the possibility of spending 2-10 weeks in a surgical dressing/splint or cast, we recommend some preparation to make daily activities and tasks easier to handle.

Cooking and Eating

- Paper plates and cups (we recommend plastic plates as the paper ones can become floppy)
- Coffee mugs with large handles to assure a full-handed grip
- Frozen dinners and things that are easy to open and pop in the microwave or oven
- Buy milk and other beverages in easy to handle sizes
- Buy enough supplies to last a week or two as shopping can be difficult after surgery
- Consider prune juice for after surgery care

Getting Dressed

- Avoid buttons, zippers, belts and shoelaces
- Comfortable clothes such as large T-shirts, sweatpants or baggy shorts are helpful
- Velcro shoes or non-skid flip-flops are helpful

Hygiene

- Keep surgical area dry (dressing/splint) – large plastic gloves will be sent home with the patient
- Long handled back brush can help
- Large bar of soap or liquid soap is helpful
- Lighter weight towels are easier to handle
- Battery-operated toothbrush makes brushing easier
- Position toilet paper in a convenient location

Thinking Ahead

After Surgery (continued)

Paying Bills

- Sign checks and put in a secure area until time of use
- Buy stamps
- Set-up direct withdrawal payments with your banking establishment(s)

A Few More Things

- A clean, clutter-free house is suggested as you won't feel up to doing housework for a while
- Clean laundry and sheets are nice to come home to after surgery
- Available cash on-hand is helpful – as it may be difficult to write checks
- Look around and put things that you regularly use where you can easily reach them
- Stock up on reading materials and/or movies
- Allow yourself time to heal – don't become frustrated or discouraged. Remember, neighbors, family and friends can be very helpful with things such as hauling out the weekly trash and recyclables

Insurance Information

General Knowledge

As a courtesy to you, our Central Scheduling Department will call for surgical insurance benefits on your behalf.

Once benefits have been determined, our Financial Service Department will contact you by letter or phone if a pre-payment is due prior to your surgery.

We cannot guarantee the benefit information received from the insurance carrier is correct, therefore we **STRONGLY SUGGEST** that you also call your insurance carrier to verify your benefits. When calling for benefits please record the name of the person you spoke with, the date and time of the call.

Name: _____

Date: _____ Time: _____

If your insurance coverage changes before the date of your surgery, please notify the Central Scheduling Department at 920.730.8833 and provide them with your new insurance information.

Patients with Self-Funded Insurance

Self-funded means: An employer provides financial responsibility for health care claims of employees and/or dependents up to a determined amount. The insurance company provides administrative duties only and does not have financial risk involved with the health care claims.

Important Questions to ask your Insurance Carrier

- I. Is the facility, Woodland Surgery Center, **IN** or **OUT** (circle one) of network: Tax ID: 391998961 and Zip Code: 54913
 - What is my deductible? _____
 - How much has been met? _____

Insurance Information

General Knowledge (continued)

- What is the co-insurance? _____
 - What is my total out-of-pocket? _____
 - How much has been met? _____
2. Will Dr. _____ be covered **IN** or **OUT** (circle one) of network? Tax ID # 391627418 and zip code 54913.
- What is my deductible? _____
 - How much has been met? _____
 - What is the co-insurance? _____
 - What is my total out-of-pocket? _____
 - How much has been met? _____
3. Does my procedure (CPT code _____) need to be pre-certified or pre-authorized? **YES** or **NO** (circle one)
- What is the phone number to call for pre-certification?
- Phone #: _____

If you are having problems obtaining your benefits, please contact your employer's health insurance plan administrator.

IMPORTANT, PLEASE READ

Post-surgical: Custom-made orthoses and splints

If you have received a custom-made orthosis or splint in the past 5 years from any therapy facility for treatment of the upper extremity, please bring it to your first scheduled therapy appointment. Due to insurance guidelines, our therapy department may need to repair or make changes to the splint you already own. Failure to provide our therapists with this orthosis or splint may result in your responsibility for payment of an orthosis or splint issued to you on your scheduled visit. Please direct any questions to our therapy billing department.

Insurance Information

Surgical Global Period

What is a global period?

A global period is a period of time starting with a surgical procedure and ending some period of time after the procedure, ranging from zero to 90 days. No global periods shall be longer than the period designated by the American Medical Association (AMA).

What is the time period?

Surgical procedures with zero postoperative days includes a global period of the first 24 postoperative hours.

Minor procedures with zero to 10 postoperative days includes the day of surgery unless that evaluation and management (E&M) service resulted in the initial decision to perform that surgical procedure. In such cases, the E&M code may be eligible for separate reimbursement.

Major procedures with 90 postoperative days includes the day before and the day of surgery unless the E&M service resulted in the initial decision to perform that surgical procedure. In this case, the E&M code may be eligible for separate reimbursement.

What is included in the global surgical package?

The reimbursement for a surgical procedure includes payment for physician services that are related to that procedure and are provided during the global period. This includes but is not limited to the following:

- Dressing changes
- Follow-up E&M services related to the original surgery
- Incision care

Insurance Information

Surgical Global Period (continued)

- Postoperative pain management by the surgeon
- Removal of staples, tubes, drains, cast, splints and sutures
- Routine, typical postoperative care or treatment
- Insertion, irrigation and removal of catheters

What is not included in the global surgical package?

Some physician services are not included in the reimbursement for a surgical procedure and therefore may be eligible for separate reimbursement during the global period. This includes but is not limited to the following:

- Splinting and casting applications and supplies
- X-rays and all therapy services
- New patient problem E&M services
- New problem consultations
- A repeat surgical procedure by the same surgeon performed on the same day as the original surgery requiring a return trip to the operation room
- A procedure or treatment that is related to the original surgery that requires a planned or unplanned return to the operating room
- All specialty form fees, such as Family Medical Leave Act (FMLA) and short/long term disability forms

This policy does not apply to facility charges for hospitals or surgery centers, or laboratory and pathology charges.

Also, never assume postoperative care is part of the global surgical package. There are codes that the AMA has determined a global period is not appropriate or has identified a global period not associated with a specific number of days.

If you have any questions about what is included in your surgical global period, please contact Hand to Shoulder Center's billing department at 920.730.8833.

Anesthesia Information

General Information

Hand to Shoulder Surgery Anesthesia

There are several options for anesthesia for patients undergoing surgery. These include local anesthesia, regional anesthesia, or general anesthesia. The type of anesthesia used depends on the nature and duration of the surgery, patient's health and medical conditions, and preferences of the patient, surgeon, and anesthesiologist.

Please note: *Anesthesia services are billed separately through the office of the anesthesiologist. If you have billing questions regarding your statement, please contact your anesthesiologist's office.*

Local Anesthesia Injection

Local anesthesia typically means anesthesia for a small area. With this type of anesthesia numbing medicine is injected at the site of surgery.

Local Anesthesia Monitored Anesthesia Care (MAC) Local anesthesia typically means anesthesia for a small area. With this type of anesthesia numbing medicine is injected at the site of surgery. Other medications to let you relax can be given as well with this type of anesthesia. Often the relaxing medications are administered through an intravenous (IV) line.

Regional Anesthesia (Nerve Blocks or Arm Blocks) Regional anesthesia puts part of your body to sleep by injecting numbing medicine through a needle placed along the path of nerves. This may be around the collarbone or neck, under the arm, or through an intravenous (IV) line in your arm. There are several different types of regional anesthesia. Sometimes an ultrasound machine or nerve stimulator is used to assist in finding the proper placement for the needle. As with local anesthesia MAC, the anesthesiologist or nurse anesthetist may supplement the block with relaxing medication administered through an IV line.

Anesthesia Information

General Information (continued)

Why Choose Regional Anesthesia?

Some of the proven advantages of regional anesthesia include better postoperative pain relief, less need for postoperative narcotic use, faster recovery from anesthesia, less nausea and for some surgeries, less blood loss and less risk of blood clots.

Is Placing the Block Painful?

The injection of numbing medicine with a needle can be slightly uncomfortable or painful, but you will have IV medication to help you relax and feel comfortable during block placement. Oftentimes a small amount of local anesthetic is injected around the site where the block needle is to be placed. The anesthesiologist may use a needle connected to a nerve stimulator to precisely locate the nerve. This causes the arm or hand muscles to twitch and move, which is not painful although it can feel strange.

How Long Will It Last?

Placing the block usually takes around 5 to 15 minutes. The numbing medications used in regional anesthesia can provide from 1 to 24 hours of pain relief, depending on the specific medication used. The muscles controlled by the nerves that are blocked may also be weak until the block wears off. You will be given back-up medicine by mouth or IV, in addition to the numbing medicine in the block.

Will I Be Awake During Surgery?

Having surgery under regional anesthesia means that the part of your body that will be operated upon will be numb during the surgery. Some patients prefer to be awake during surgery. Others prefer to be asleep. During your surgery you can be as awake or as asleep as you and the surgical team (surgeon and anesthesiologist) decide. Sometimes general anesthesia is recommended as well as the regional block. Your anesthesiologist will discuss this with you before the surgery. You will not be able to see the surgery itself because a large sterile drape is placed between you and the surgeon. This is to protect the “sterile field,” the important area of your surgery from any contamination.

Anesthesia Information

General Information (continued)

Are There Any Complications?

As with any anesthetic, there are risks associated with the benefits of regional anesthesia. These include incomplete pain relief, soreness or bruising at the needle site, or tingling that last for several days. Serious complications can occur but these are very rare and may include significant bleeding, infection, or nerve injury. Your surgeon and anesthesia provider will check to make sure you are comfortable before, during and after the procedure. Do not hesitate to tell them if you are not.

Types of Regional Anesthesia

The interscalene, supraclavicular, infraclavicular, and axillary blocks all numb the brachial plexus, the network of nerves that supply the arm, forearm and hand.

Supraclavicular Block: The numbing medicine is injected above the collarbone, shallow to the lung and outside of the great vessels. This block is more widely used than in the past because newer technologies have made it safer. It provides anesthesia to the upper arm, elbow, wrist and hand.

Axillary Block: The numbing medicine is injected under the armpit (the axilla). This generally provides good anesthesia for hand, wrist, forearm and elbow surgery.

Interscalene Block: The numbing medicine is injected towards the brachial plexus between the scalene muscles, which are at the base of the neck above the collarbone. This type of regional anesthesia provides good anesthesia for wrist, forearm, upper arm and often shoulder surgery.

Infraclavicular Block: The numbing medicine is injected towards the brachial plexus below the collarbone. This generally provides good anesthesia for wrist, forearm and elbow surgery.

Anesthesia Information

General Information (continued)

Bier Block: The numbing medicine is injected through an IV line in the arm being operated on, with a tourniquet around the upper part of your arm to hold the medicine in the arm, preventing it from leaking out to the rest of your body. This type of block is useful for short procedures such as carpal tunnel surgery.

Rescue Block: The numbing medicine is injected after surgery to make you more comfortable, or after one of the blocks above has been performed in order to complete your anesthesia.

General Anesthesia

General anesthesia is when you are put to sleep for your surgery. Newer medications and techniques make side effects such as nausea, dizziness and drowsiness less likely than they used to be although side effects still may occur. General anesthesia may be used either instead of or in addition to a nerve block.

Which type of anesthesia should I have?

The type of anesthesia used depends on the nature and duration of the surgery, your general health and medical conditions and your preferences as well as those of your doctor. You and your doctor can decide together what method is best for you.

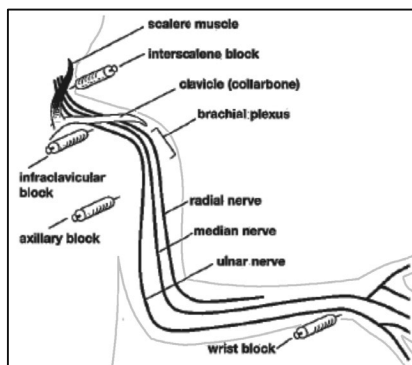


Diagram of the regional blocks used to numb the nerves in the arm.

Patient's Bill of Rights And Responsibilities

Each patient, patient representative and/or patient surrogate treated at Woodland Surgery Center has the right to:

- Exercise his or her rights without reprisal, and respect for property and person;
- Voice grievances regarding treatment or care that is (or fails to be) furnished;
- Be fully informed about a treatment or procedure and the expected outcome before it is performed;
- Designate a legal representative to exercise their rights;
- Personal privacy;
- Receive care in a safe setting;
- Be free from all forms of abuse or harassment;
- Have the Surgery Center comply with all the rules for privacy and security of individually identifiable health information (HIPAA – Health Insurance Portability and Accountability Act);
- Respectful care given by competent personnel with consideration of their privacy concerning their medical care;
- Be given the names of their attending physicians, the names of all other physicians directly assisting in their care, and the names and functions of other health care persons having direct contact with the patient;
- Have records pertaining to their medical care treated as confidential;
- Know what Surgery Center rules and regulations apply to their conduct as a patient;
- Expedient and professional transfer to another facility when medically necessary and to have the responsible person and the facility that the patient is transferred to notified prior to transfer;
- Good quality care and high professional standards that are continually maintained and reviewed;

Patient's Bill of Rights

And Responsibilities (continued)

Each patient, patient representative and/or patient surrogate treated at Woodland Surgery Center has the right to:

- Be given information about his/her diagnosis, evaluation, treatment and prognosis, in layman's terms and to the degree that it is known; if it is not medically advisable to give this information to the patient, the information shall be given to the responsible person on his/her behalf;
- Information on after-hour and emergency care;
- Give an informed consent to the physician prior to the start of a procedure;
- Be advised of participation in a medical care research program or donor program, the patient shall give consent prior to participation in such a program, a patient may also refuse to continue in a program that has previously informed the consent to participate in;
- Refuse drugs or procedures and have a physician explain the medical consequences of the drugs or procedure;
- Medical and nursing services without discrimination based upon age, race, color, religion, sex, national origin, handicap, disability, or source of payment;
- Have access to an interpreter whenever possible;
- Be provided with, upon request, access to all information contained in their medical record;
- Change providers if other qualified providers are available;
- Accurate information regarding the competence and capabilities of the organization;
- Receive information regarding methods for expressing suggestions or grievances to the organization;
- Information regarding fees for services and payment policies;

Patient's Bill of Rights

And Responsibilities (continued)

Each patient, patient representative and/or patient surrogate treated at Woodland Surgery Center has the responsibility to:

- Provide complete and accurate information to the best of their ability about their health, any medications taken, including over the counter products and dietary supplements and any allergies or sensitivities which may have a direct effect on the care provided at the surgery center;
- Health Literacy – Patients need to bring medication bottles the day of surgery if the patient is not knowledgeable of all medications, dosages and reason for taking medications;
- If patient is aware of medications, dosages and reason for medications, they should bring their completed Medication Reconciliation Form;
- Follow instructions given by his/her surgeon, anesthesiologist, and operative care staff;
- Be respectful to health care professionals and staff members, as well as other patients and visitors;
- Provide the Surgery Center with all information regarding third party insurance coverage;
- Fulfill financial responsibility for all services rendered as determined by the patient's insurance carrier;
- Provide a responsible adult to provide transportation home unless otherwise instructed by your surgeon.

Grievance

Statement

Woodland Surgery Center provides for the expression of grievances, complaints and suggestions by the patient and patient's family at all times without reprisal.

- I. Every patient has the right to file a grievance with any staff member, or the Nurse Administrator.
- II. If the complainant is not satisfied, the grievance is taken to the Medical Director. In the event the problem is not resolved, the patient has the right to file a written complaint to the Wisconsin Department of Health.
- III. The grievance process must adhere to a specific time frame. Review of the grievance will be within 30 days - response within 60 days.
- IV. All grievances made by a patient or patient's representative regarding treatment or care that is (or fails to be) furnished will be investigated.
- V. All alleged violations/grievances relating, but not limited to, mistreatment, neglect, verbal, mental, sexual, or physical abuse will be fully documented.
- VI. All allegations will be immediately reported to the person in authority (Nurse Administrator).
- VII. Only substantiated allegation(s) will be reported to the state authority or the local authority, or both.
- VIII. Woodland Surgery Center must document how the grievance was addressed, provide the patient with written notice of decision, contact name, the steps taken to investigate the grievance and the results of the process with the date the grievance process was completed.

Any complaints can be addressed to the Department of Health and Human Services, Madison, WI 1-800-642-6552 or online at <http://dhs.wisconsin.gov/bqaconsumer/HealthCareComplaints.htm>

Patients can also contact the office of the Medicare Beneficiary Ombudsman at 1-800-633-4227 (1-800-Medicare) or go online to <http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>

Advanced Care

Directives

The government mandates that we offer Advanced Care Directives. If you do not have a Living Will or Power of Attorney for Healthcare, please contact us immediately at 920.730.8833 or 888.383.3039 and ask for Central Scheduling. Forms to be completed will be mailed to you or go to our website at

<https://handtoshoulderwisconsin.com/forms/>

This form is also available on the Department of Health Services Website at <https://www.dhs.wisconsin.gov/forms/advdirectives/index.htm>.



Thank you for choosing Woodland Surgery Center. It is our privilege and pleasure to care for you and our community with expert knowledge and care from hand to shoulder. It is our primary focus to provide you with the best possible surgical outcome.

Woodland Surgery Center, LLC, is a for-profit institution. As owners, Doctors Lumsden, Olvey, Van Zeeland, Hildahl, Hennigan, Munaretto, Lubbe, France, and Grosskopf participate directly in the decision making process, and thereby influence the quality of care and patient safety.

NOTICE OF NONDISCRIMINATION

Woodland Surgery Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Woodland Surgery Center does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Woodland Surgery Center

- 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, other 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 Woodland Surgery Center, Nurse Administrator at 1-888-383-3039.

If you believe that Woodland Surgery Center 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:

Tess Rasner, Nurse Administrator
2325 N. Casaloma Drive
Appleton, WI 54913
920-702-8888 (voice) or 920-830-0638 (fax)
WSCadmin@newhands.net

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Woodland Surgery Center, Nurse Administrator is available to assist 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/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 1-800-537-7697 (TDD)

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



2325 N. Casaloma Drive
Appleton, WI 54913
920.730.8833 • 888.383.3039



"LIKE US"