

# You Are Our First Priority

Thank you for choosing Pasadena Surgery Center for your procedure. Our expert team will work hard to ensure that you feel at ease and comfortable while you are with us.

Our goal is to provide you with the best, most effective care so that you can return to your normal activities as quickly as possible.

If you have specific questions that are not answered in this brochure, please ask your physician.

If you have not received a telephone call from a preoperative (Pre-Op) surgery center team member, please call (727) 302-9200 the day before your surgery.

#### **Our Location**

Pasadena Surgery Center is located between Central Avenue and First Avenue South, just east of 70th Street in St. Petersburg, Florida. The address is 6945 First Avenue South. The surgery center is on the south east side of the building. See the map on the back page for driving directions to the surgery center.

# **Surgery Center Hours**

Pasadena Surgery Center is open Monday through Friday during regular business hours, 8 a.m. to 5 p.m. and will open earlier if scheduled. The facility will open at least one hour prior to a scheduled procedure time. Our doors will not be open before 6 a.m.

# **Preparing For Your Procedure**

Do not eat or drink ANYTHING, including candy or chewing gum, after midnight before your procedure unless you have been given special instructions by your physician. This is extremely important because you could have serious complications if your stomach is not empty during surgery.

Medications for heart, blood pressure, breathing, seizures, Parkinson's Disease and prescription stomach medications should be taken on the morning of surgery with a few sips of water at least two hours before your scheduled procedure. Do not take medications for diabetes or diuretics (water pills) until after your surgical procedure.

If you develop any changes in your health between the Pre-Op visit to your physician and the day of the procedure, notify your physician. Please report even minor changes such as an elevated temperature, cough or cold.

If you have had direct exposure with COVID-19 or tested positive for COVID-19 in the last two weeks, you will need a negative PCR test prior to scheduling.

For your own safety and protection, you will not be allowed to drive a motor vehicle following your procedure. Please make arrangements to have a responsible adult bring you and drive you home from the center. Verification of the driver will be made prior to any procedure requiring sedation. Your surgery will be cancelled if you fail to have a responsible adult driver to take you home. Going home on foot, bus, bicycle, motorcycle or taxi are not allowed. Please discuss any transportation difficulties or questions you may have with us as soon as possible.



#### The Day Of Your Procedure

Bathe or shower and brush your teeth the morning of your surgery. Do not swallow any water. Do not use perfumes, colognes or body lotions.

Wear warm, loose-fitting, comfortable clothes. Shirts with front buttons or zippers are best. Wear sensible shoes to allow safe walking.

Leave valuables at home. There is no safe storage area for these items at the surgery center. Remove all jewelry and body piercing studs before leaving for the center. If your tongue is pierced, remove the stud. In case of an emergency, the stud can be an obstruction for placing lifesaving breathing instruments.

If you wear eye glasses, contact lenses or dentures, bring an appropriate storage case because you may be asked to remove them prior to your procedure.

Limit the number of people accompanying you. To maximize the comfort of everyone waiting, we request that only one person come with you.

Be sure to take your insurance card and a photo identification card such as a driver's license with you on the day of your procedure. Also, take with you the completed Pre Anesthetic Evaluation Form (on our website) with a list of your medications.

In the Pre-Op area, you will be asked the name of your physician and to state what procedure you are to have. This is done to help ensure that you have been properly informed. If you are unclear about your procedure, this is the time to ask questions.

We will be happy to ask your physician to speak to you. Before anything else is done, a member of our Pre-Op team will ask you to sign two consent forms. One gives the Pasadena Surgery Center your permission to perform the procedure and the other is to allow the anesthesia team to care for you during the procedure.

#### **After Your Procedure**

Following your procedure, you will be moved to our fully-equipped recovery area. There, you will be closely monitored by our anesthesia and nursing team. The length of stay varies; many patients are discharged within 30 minutes after their procedures.



#### **After You Return Home**

Your recovery room nurse will provide you with postprocedure instructions regarding diet, rest and medication. Plan to have someone stay with you for at least four to six hours following your procedure and pamper yourself during this time. Patients having general anesthesia should have someone stay with them at least 12-24 hours or longer if instructed by your physician.

We also recommend that you postpone the following activities for 24 hours after your procedure or longer while you are taking pain medications:

- Driving or operating machinery
- Signing important papers
- Making significant decisions
- Drinking alcoholic beverages

## **Other Helpful Suggestions**

If your physician has given you a prescription, have it filled before your procedure. Then, after you return home, you will have the medication available when you need it.

#### **Financial Arrangements**

Our business office team will be glad to submit the claim to your insurance company or Medicare for Pasadena Surgery Center charges. Standard outpatient procedures are usually covered by your medical insurance or Medicare.

You will receive separate bills from the Pasadena Surgery Center, your physician and your anesthesiologist. You may also receive a bill for any laboratory, pathology or diagnostic services that you receive.

Depending on your coverage, you may be asked for partial payment upon admission to the center. We make every effort to inform you of this amount prior to your admission. When you arrive for your procedure, you should be prepared to pay all co-payments and your deductible if it has not been met. For your convenience, we accept MasterCard, American Express and VISA credit cards. We also accept personal checks, cash, cashier's checks and money orders.

#### **Patient Rights and Responsibilities**

In recognition of our responsibility in rendering patient care, these rights and responsibilities are affirmed in the policies and procedures.

## A patient has the right to:

• Be treated with courtesy and respect that includes consideration of the psychosocial, spiritual and cultural values, appreciation of individual dignity and protection of individual need for privacy and Protected Health Information (PHI).

- Be informed of patients' rights to change their provider if other qualified providers are available.
- Be accurately notified of the accreditation status of the facility, reflecting AAAHC as the accrediting entity.
- Know that any marketing or advertising regarding the competence and capabilities of the organization is not in any way misleading to the patient.
- Know who is providing medical services and availability of other qualified providers if change is requested.
- Know what patient support services are available, including an interpreter if the patient does not speak English and requests services.
- Know what rules and regulations apply to patient conduct.
- Be given, by the health care provider, information concerning diagnosis, planned course of treatment, alternatives, risks and prognosis so patients may make informed decisions regarding their care.
- Receive impartial access to medical treatment or accommodations, regardless of race, sex, age, national origin, religion, physical handicap or source of payment without reprisal in a safe environment, free from abuse or harassment.
- Receive treatment for any emergency medical condition that will deteriorate from failure to provide treatment.
- Know if medical treatment is for purposes of experimental/research and to give patient consent or refusal to participate in such experimental research.
- Participate in decisions involving personal health care, unless contraindicated by concerns for their health.
- Participate in an appropriate assessment and management of pain.
- Refuse treatment, except as otherwise provided by law.
- Be given, upon request, full information and necessary counseling on the availability of known financial resources for his or her care.
- Know, upon request and in advance of treatment, whether the health care provider or health care facility accepts the Medicare assignment rate.
- Receive, upon request, prior to treatment, a reasonable estimate of charges for medical care.
- Receive a copy of reasonably clear and understandable, itemized bill and, upon request, to have charges explained.

- Be advised prior to care in the event any facility providers do not have malpractice insurance.
- Express grievances regarding any violation of individual patient rights, as stated in applicable state and/or federal law, through the grievance procedure of the health care provider or health care facility, which served the patient, and to the appropriate state-licensing agency.
- Be notified in the event of a breach of patient confidentiality.
- If the organization maintains electronic PHI, obtain electronic copies of patient PHI.
- If treatment is paid for out-of-pocket in full, request organization not notify insurance company of treatment.

#### A patient is responsible for providing the healthcare team with:

- To the best of the patient's knowledge, provide accurate and complete information about present complaints, past illnesses, hospitalizations, medications, dietary supplements, over-the-counter medications, allergies as well as reactions and other matters related to health.
- A complete list of current medications including overthe-counter products and dietary supplements and any allergies or sensitivities.
- Report of unexpected changes in the patient's condition to the health care provider.
- Confirmation to the health care provider whether the patient comprehends a contemplated course of action and what is expected of the patient.
- Full participation with the treatment plan recommended by the health care provider.
- A responsible adult to transport the patient home from the facility and remain with the patient for 24 hours, if required by the provider.
- Punctuality at appointments, and when the patient is unable to do so for any reason, notify the health care facility.
- Accountability for the patient's actions if refusing treatment or not following the health care provider's instructions.



- Fulfillment of patient financial obligations for health care provided by the facility as promptly as possible.
- Cooperation in following facility rules and regulations affecting patient care and conduct.
- Information regarding the patient's living will, medical power of attorney or other directive that could affect patient care.
- Consideration and respectful treatment of the facility staff and property as well as patients and visitors.
- Any concerns or questions regarding what to expect relative to pain, pain management and other options available.
- A request for electronic Protected Health Information (PHI) if available and desired.
- A request for restricted disclosure of PHI for insurance purposes if treatment is paid out-of-pocket in full.

#### **Filing Complaints**

If you have concerns about the care you received at this center, please call the facility administrator at (727) 302-9200.

If you have a complaint against an ambulatory surgical center or practitioner you may contact the AHCA Consumer Assistance Unit Health Facility Complaint Hotline at 1 (850) 487-3183 or 1 (888) 419-3456 or write to the Agency For Healthcare Administration, Medical Quality Consumer Services, 2727 Mahan Drive, Tallahassee, Florida 32310.

If you are a Medicare recipient and have a complaint against a health care professional or facility you may contact the Office of the Medicare Beneficiary Ombudsman by calling 1 (850) 414-7209 or going to:

www.medicare.gov/claims-appeals/your-medicare-rights/ get-help-with-your-rights-protections

#### **How To Find Pasadena Surgery Center** 92 **SEMINOLE** 699 687 S the C the C the S Pasadena Surgery Center is located PINELLAS between Central Avenue and First **PARK** Avenue South, just east of 70th Street (693) in St. Petersburg, Florida. The address 54th Ave N is 6945 First Avenue South. The surgery Bay Pines Blvd StN center is on the south east side of 38th Ave N the building. TREASURE StN 19 ISLAND (275) > From Downtown St. 5th Ave N ST PETERSBURG 5th Ave N 66th St N Petersburg: Take Central Avenue

**Gulf of** 

**Mexico** 

ST PETERSBURG **BEACH** 

699

Central Ave

70th St S

1st Ave S

Pasadena

to Pasadena Avenue and turn left. Travel one block and turn right on to First Avenue South. Pasadena Surgery Center is located approximately two blocks on the right.

From 66th Street North: Drive south on 66th Street. Follow the road that veers

to the right which becomes Pasadena Avenue. Turn right on First Avenue South (one block past Central Avenue). Pasadena Surgery Center is located approximately two blocks on the right.

From Seminole: Take Seminole Boulevard to Bay Pines Boulevard. Turn right on Park Street. Travel south on Park Street and turn left on First Avenue South (one block south of Central Avenue). Travel approximately four blocks. Pasadena Surgery Center is on the left.



Sunshine Skyway Bridge

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**GULFPORT** 

679

Gulfoort Blvd

682

6945 First Avenue South, St. Petersburg, Florida 33707 PasadenaSurgeryCenter.com