SurgiCenter
The Reading Hospital
and Medical Center
PO Box 16052
Reading, PA 19612-6052

located at: Sixth Avenue and Spruce Street, West Reading

4-4113 Rev. 5.01

You're Scheduled for Ambulatory Admission

on _____.

Please report at _____.

☐ **You must also undergo a pre-admission evaluation. Your appointment in our Pre-Admission Testing Center is on**

_____ **at** _____.

☐ **You do not need a pre-surgical evaluation.**

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About Ambulatory Admissions

Ambulatory Admissions eliminate at least one day of hospitalization by having the patient report to the Hospital on the same day that surgery or other procedure has been scheduled.

Following the operation or procedure, you are then admitted to the Hospital for recovery.

Questions: If you have any questions about the particular operation or procedure scheduled for you, please contact your physician. The information in this booklet should help answer questions you may have about what to bring with you to the Hospital, where to park, and where to report.

Your Pre-Admission Evaluation

If you require a pre-admission evaluation, the box on the cover of this brochure will be marked. If so, please read this page to better understand this evaluation.

If your surgeon did not schedule an appointment for you, please call his or her office to make arrangements for this evaluation.

Evaluation and testing: This appointment provides your doctor with information needed to perform your procedure. It may include blood tests, an EKG, and x-rays.

Also, an anesthesia evaluation—involving questions about your medical history and a physical examination—is provided by an anesthesiologist during this pre-admission evaluation appointment.

Bring the following with you:

- a list of all medications and the dosages you are currently taking;
- a list of all allergies you may have;
- and your identification card and referral forms for your health benefits program.

Where to report for your pre-admission evaluation: Report to our Pre-Admission Testing Center, Suite 300, in the Doctors Office Building.

- Parking: use the 7th Avenue Parking Garage at the corner of Seventh Avenue and Spruce Street. *(See map, pp. 5-6)*
- Entrance: Take the enclosed walkway from the second level of the garage to the second floor of the Doctors Office Building. Take the stairs or elevator up one floor.

Before Coming to the Hospital for Ambulatory Admission

Follow all dietary guidelines: Your surgeon or your anesthesiologist will tell you what you may eat or drink the day before and day of your procedure. Please do what these physicians advise.

Be sure to bring the following:

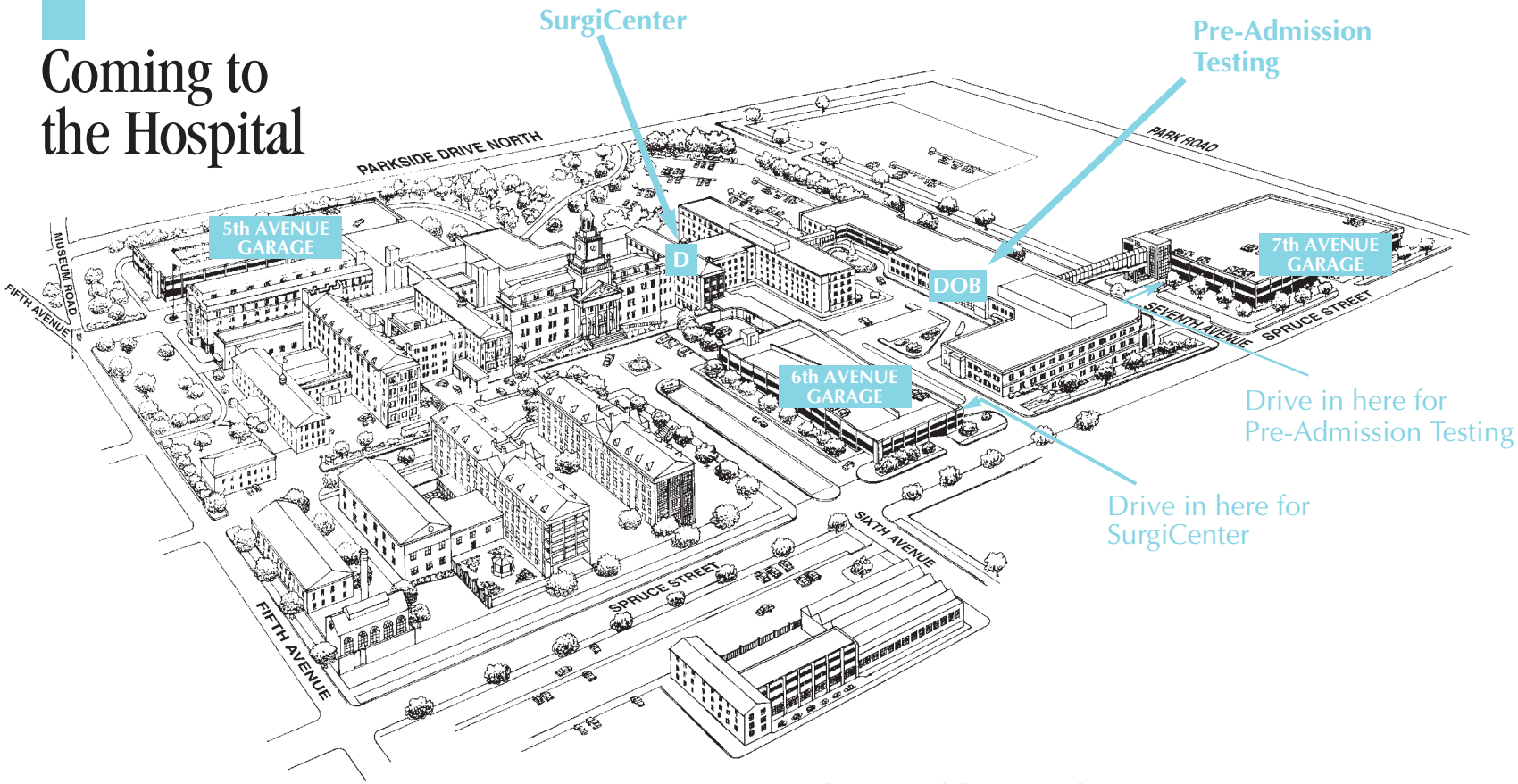
- an overnight bag with personal items you may need in the Hospital; these may include pajamas, bathrobe, underwear, slippers, and toiletries. *(Please limit the number of personal articles you keep with you on the day of surgery.);*
- a list of medications and the dosages you are currently taking;
- a list of allergies you may have;
- and your identification card and referral forms for your health benefits program.

Please:

- leave contact lenses at home; wear your eyeglasses instead;
- leave jewelry and other valuables at home;
- do not wear makeup or nail polish.

If you are having cosmetic surgery: Special arrangements for payment of your physician and Hospital bills **must** be made in advance. Your physician's office will explain these in detail.

Coming to the Hospital



For Pre-Admission Evaluation:

Parking — Park in the 7th Avenue Garage at the corner of Seventh Avenue and Spruce Street.

PAT Center — Enter the Doctors Office Building through the enclosed walkway on the second level. Take the elevator or stairs to the third floor to Suite 300.

On the Day of the Procedure:

Parking — The lower level of the 6th Avenue Garage, near the main Hospital entrance, is reserved for SurgiCenter patients. Please use the curved entrance off Spruce Street; this roadway is marked with a SurgiCenter sign. Display the parking tag you were given.

If you misplace or forget this tag, please advise our uniformed attendant when you enter the garage on the day of surgery.

SurgiCenter — Our attendant will direct you to the SurgiCenter entrance to D-Building. Take the elevator to the fourth floor.

Registration — When you exit the elevator, the Reception Desk will be to your right. Please register there as soon as you arrive.

At the SurgiCenter

Information check: In a private interview room, our SurgiCenter staff will verify personal and health benefits information. Please bring your health benefits ID card and any necessary referral forms with you.

Changing area: You will then be escorted to a dressing room in our Ambulatory Admission Center. You will be asked to change into a patient gown, robe, slippers, and cap.

Hangers and a garment bag will be provided for your clothes. These and the items in your overnight bag will be taken to the room you will occupy following the procedure.

If you wish, a family member or friend may wait with you. Because of space limitations, we ask that only **one** person accompany you to the SurgiCenter. Other members of your family may wait in our Hospitality Lounge, located in E-Lobby.

Preparation: Our Nursing staff will help you change, check your vital signs, and prepare you for the scheduled procedure. You will be helped onto the litter, and may be given medications to relax and prepare you for the procedure. These medications may make you drowsy, so the side rails on the litter will be raised for your protection. When your preparations have been completed, you will be transported to the operating room or procedure suite. Your final anesthesia medication will be administered there.

Your friend or family member who wishes to wait at the Hospital will be directed to our Hospitality Lounge, located in E-Lobby. He or she will be notified when your procedure is over, and when you can be visited in your room.

After the Procedure

Recovery time: Immediately following completion of the procedure, you will be taken to a recovery area. When your anesthesiologist deems that you are sufficiently recovered from the anesthesia, you will be taken to your assigned room.

Your room: If you feel up to it, your friend or family member can visit you for a brief time in your room.

Your personal belongings will be brought to your room on the afternoon of surgery.

Instructions: Your nurse will explain any special instructions you need to follow, and is available to answer all of your questions.

Important Telephone Numbers

This brochure answers the most common questions asked by our patients. If you would like additional information on some aspect of your upcoming hospitalization, please contact:

your physician	for specific information about the scheduled procedure, preparation, or follow-up care
our SurgiCenter scheduler 610-988-8008	if you need to cancel your procedure or pre-admission evaluation, or if you have questions about either appointment

Your family can call:

our Hospitality Lounge 610-988-8679	for information on the progress of your procedure if your family cannot wait at the Hospital

Let us know how you feel: After you are fully recovered, we would appreciate hearing your comments or suggestions. Please direct them to our Patient Representative (write to The Reading Hospital and Medical Center, PO Box 16052, Reading, PA 19612-6052, or call 610-988-8663).

Patient Rights and Responsibilities

Your Rights

We believe that our patients, their families, and their friends should be treated with respect, understanding, and compassion. These are your rights as our patient, reflecting our commitment to maintaining your personal dignity.

1. You have the right to receive the best health care available, without unnecessary delay, no matter your race, color, age, creed, handicap, sex, national origin, or economic status.
2. You have the right to receive from your doctor complete information about your illness and treatment in words you can understand. Your entire healthcare team is committed to giving you information and answering your questions.
3. You have the right to know the names of all the people taking care of you.
4. You have the right to have a family member or friend told about your admission to the Hospital.
5. You have the right to have the doctor who referred you here told about your admission, and be kept up-to-date about your illness and treatment.
6. You have the right to be told by your doctor of any test, procedure, or treatment that has risks, and to give written consent for this test, procedure, or treatment to be done. If you are too ill or otherwise cannot understand this information, you have the right to have your family member or friend told.

7. You have the right to ask that another doctor review your plan of treatment.
8. You have the right to say “no” to any treatment, and to leave the Hospital at any time. You have the right to hear from your doctor what may happen if you refuse the treatment or leave.
9. You have the right to be told by your doctor about any research project that may be helpful to you. You have the right to have all of your questions answered about this treatment plan, and then to give written consent if you wish to become part of the research project.
10. You have the right to make choices now in case you become too ill to speak for yourself later. This right to choose is called an Advance Directive. You may choose someone to make healthcare decisions for you. You may also choose what treatments you would like or not like to have done.
11. You have the right to see all information in your medical records within a reasonable time of your request. If your doctor feels you should not see this information for medical reasons, you have the right to have someone else review your record.
12. You have the right to keep your medical record and other healthcare information confidential. *You need to know that we are required by law to share some types of information. Also, we need to provide information to your benefits plan in order for your care to be covered.*
13. You have the right to privacy. You may ask us to limit your visitors if you wish.
14. You have the right to procedures and routines that protect you from all forms of abuse, harassment, neglect, or mistreatment.

15. You have the right to be free from restraints — both physical means and medications — that are used only for convenience or discipline.
16. You have the right to get information about the pain you may experience and ways to prevent or reduce your pain. You also have the right to prompt response when you tell us about pain you are having.
17. You have the right to share your concerns about the care or services you are receiving. If you have a problem or complaint, you may talk with your doctor, nurse, or any member of your healthcare team. You may also call our Patient Representative at 610-988-8663. You have the right to contact the Pennsylvania Department of Health, PO Box 90, Harrisburg, PA 17108. Phone: 717-783-8989.

Our Responsibilities to You

The Reading Hospital and Medical Center accepts these responsibilities as part of our mission to provide you with the healthcare services you need.

1. We will provide the best health care possible in a safe, clean, quiet, and pleasant environment.
2. We will provide education to help you and your family understand your illness, what you can do about it, and, when possible, how to stay healthy after recovery.
3. We will provide you with options for treatment that may be needed at another facility, as an outpatient, or at home.
4. We will provide mental health services, social services, and spiritual services if requested by you or your doctor.

5. We will provide an interpreter at no charge to patients who do not speak English whenever possible.
6. We will provide a sign language interpreter at no charge. We will also provide other devices at no charge to assist our deaf and hard-of-hearing patients.
7. We will provide a Patient Representative to receive suggestions on how we can improve our services.
8. We will provide you with full information about your Hospital bill if you request it.
9. We will provide you with a Patient Information booklet to help you and your family learn what to expect during your Hospital experience.

Your Responsibilities to the Hospital

To help us help them, our patients have responsibilities to provide the Hospital with certain information and support.

1. Please keep your appointments with us.
2. Please be open and honest with us about the health and pain management information we give you. Let us know immediately if you do not understand it, or if you feel that you cannot follow the instructions we give you.
3. Please tell your doctor and healthcare team about any changes in your health, including any pain you may be experiencing.
4. Please be considerate of other patients by following our guidelines on the number of visitors, visiting hours, noise level, and no smoking. Please be sure that your visitors are considerate also.

5. Please help us protect confidentiality and privacy — yours and that of our other patients.
6. Please provide the benefits plan information necessary to process your Hospital bill.
7. Please pay your part of the Hospital bill as soon as possible. If you think you will have problems with your bill, please let us know.

These rights and responsibilities apply to all patients, including children. When the patient is a minor, the parent or guardian assumes these rights on behalf of the child.