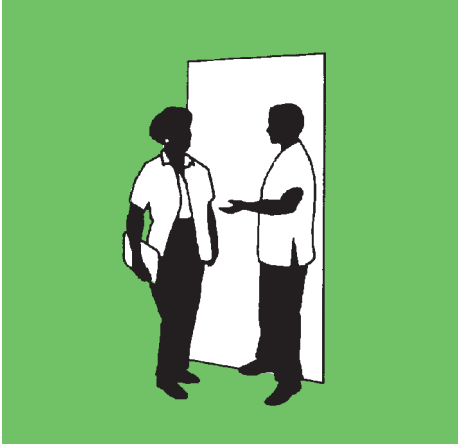


You Have an Appointment in The Center for Pain Management

on _____ at _____.

Please call the office _____
after 2 p.m. on _____
to confirm your arrival time at the Hospital.

The Reading Hospital
and Medical Center

Important Patient Instructions

- If your procedure is scheduled **for the morning**, do **not** eat or drink anything after midnight the night before.
- If your procedure is scheduled **for the afternoon,** you may have clear liquids in the morning up to 2 hours before your procedure.
- You may take only the medicines listed here

_____

_____

_____

You have a follow-up appointment in your Physician's office

on _____

at _____.

If you have any concerns,
contact your physician.

About Pain Management

Pain Management Services were introduced at The Reading Hospital for our patients' convenience. Following your procedure, you will go home with instructions on taking care of yourself through your recovery.

Questions: If you have any questions about the particular 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.

Before Coming to the Hospital

Follow the *Important Patient Instructions* on page 1.

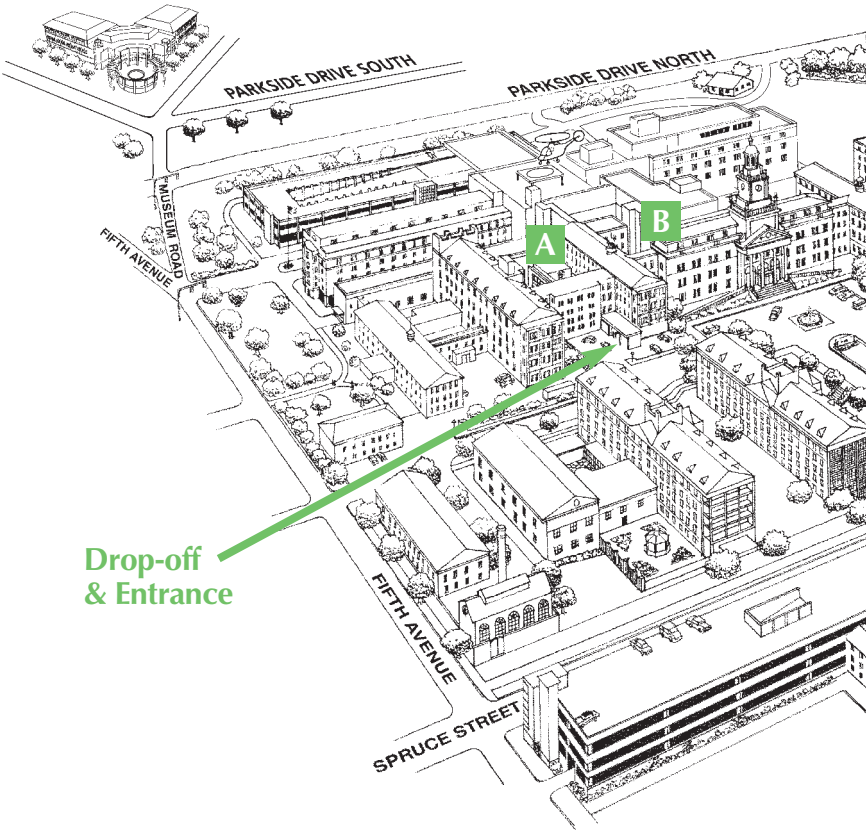
Be sure to bring the following:

- 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:

- arrange for a driver; you will not be able to drive yourself home.
- leave jewelry and other valuables at home.

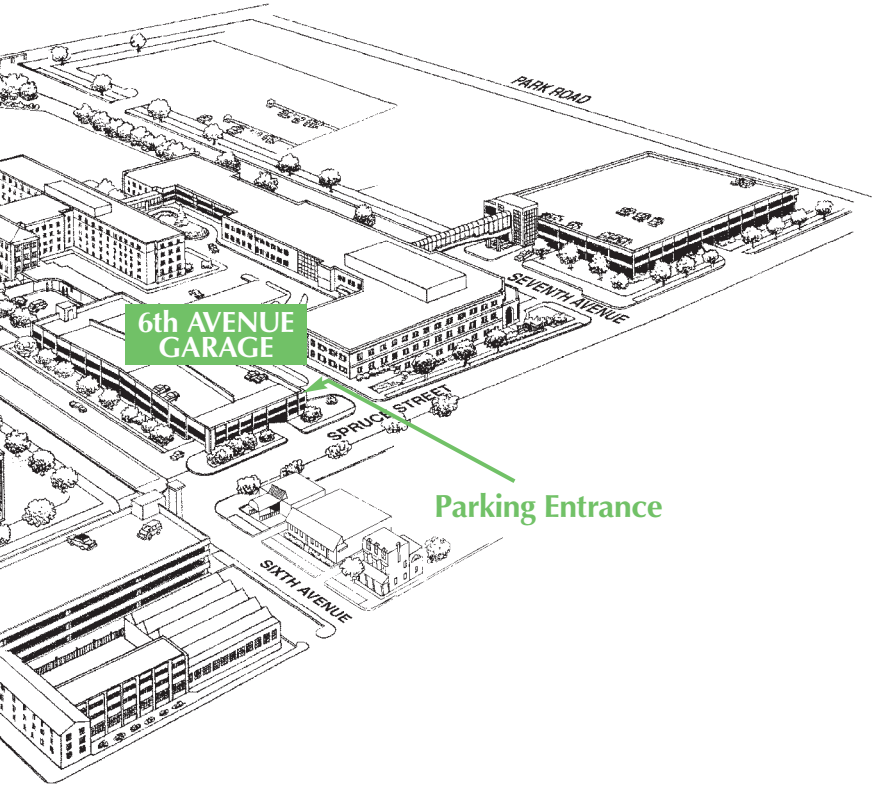
Coming to the Hospital



On the Day of the Procedure:

Entrance — Have your driver drop you off at the entrance between A and B Buildings. Turn left. The entrance to The Center for Pain Management will be the second door on your left — across from the elevators.

Registration — The Reception Desk will be to your right. Please register there as soon as you arrive.



Parking — There may be parking near the drop-off site. If not, the lower level of the 6th Avenue Garage, near the main Hospital entrance, is reserved for Pain Management and SurgiCenter drivers. Your driver should use the curved entrance off Spruce Street; this roadway is marked with a SurgiCenter sign. Display the parking tag provided by your physician's office.

If you misplace or forget this tag, please have your driver advise our uniformed attendant when he/she enters the garage on the day of your procedure.

At The Center for Pain Management

Information Check: Our registration clerk will verify personal and health benefits information. Please bring your health benefits ID card, any necessary referral forms, and medication list with you.

Changing Area: You will then be escorted to a dressing room and be asked to change into a patient gown, robe, slippers, and cap.

You will be given a locker for your clothing and a key. Keep the key with you until it's time to change back into your clothing.

Because of space limitations, we ask that your driver and any other members of your family wait in our nearby waiting room.

Preparation: Our Nursing staff will help you change, check your vital signs, and prepare you for the scheduled procedure. When final preparations have been completed, you will be escorted to the room or procedure suite.

After the Procedure

Recovery Time: Immediately following completion of the procedure, you will be taken to a recovery area. When your physician deems that you are sufficiently recovered, you will be discharged.

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

Going Home: In the meantime, we will tell your driver that you are ready. She or he will meet you at the same place that you were dropped off.

Patient Rights and Responsibilities

Your Rights

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

- You, or your representative when appropriate, have the right to be informed of all your rights at the earliest possible moment in the course of your Hospital stay.
- You have the right to receive respectful health care from competent professionals without unnecessary delay, no matter your race, color, national origin, age, language, religion, handicap, sex, sexual preference, gender identity or expression, or source of payment.
- You have the right to receive complete information about your illness and treatment in words you can understand so that you can be involved in your care planning and treatment. Your entire healthcare team is committed to giving you information and answering your questions. When not medically advisable to communicate this information to you, this information will be provided on your behalf to your next of kin or other appropriate person.
- You have the right to know the names of all the people taking care of you and their functions.
- You have the right to have a family member, friend, or support person notified promptly about your admission to the Hospital.
- You have the right to have your personal doctor notified promptly about your admission, and be kept up-to-date about your illness and treatment.
- You have the right to be told by your doctor of any test, procedure, or treatment that has risks, and to give informed consent for this test, procedure, or treatment to be done. In emergencies, or if you are too ill or otherwise cannot understand this information, you have the right to have your family member or friend told.

- 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.
- You have the right to be told by your doctor about any research or donor program that may be helpful to you. You have the right to have all of your questions answered, and then to give informed consent if you wish to become part of the research or donor program. You also have the right to refuse to continue in such a program at any time. If you are too ill or otherwise unable to understand this information, your representative will receive the information, provide consent, and/or discontinue your participation in the research or donor program.
- You have the right to make choices now and to document those choices 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.
- You have the right to see all information in your medical record 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.
- 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.
- You have the right to be informed about continuing healthcare needs to be addressed following your discharge, as well as about recommended methods for addressing those needs.
- You have the right to personal privacy.
- You have the right to visitation from family members, friends, or support persons. You have the right to restrict or limit your visitors. Visitation may be restricted or limited when visitors would interfere with your care or the care of other patients.
- You have the right to receive care in a safe setting and to be free from all forms of abuse, harassment, neglect, or mistreatment.

- You have the right to be free from restraints or seclusion of any form imposed as a means of coercion, discipline, convenience, or retaliation by staff.
- 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.
- You have the right to have interpreting services, when possible, provided at no charge if you do not speak English.
- You have the right to full information about your Hospital bill if you request it.
- You have the right to full information and counseling on the availability of known financial resources for your health care.
- You have the right to know what Hospital rules and regulations apply to your conduct as a patient.
- You have the right to expect emergency procedures to be implemented without unnecessary delay.
- You have the right to assistance in obtaining consultation with another physician at your request and your expense.
- You have the right to expect good management techniques at the Hospital to use your time effectively and avoid personal discomfort.
- You have the right to good quality care and high professional standards that are continually maintained and reviewed.
- You, when medically permissible, have the right to be transferred to another facility only after you or your representative have received complete information concerning the need for and alternatives to such a transfer. The institution to which you would be transferring must first accept you for transfer.
- You have the right to access an individual or agency authorized to act on your behalf to assert or protect your rights as set forth in this document.
- You have the right to be informed about unanticipated outcomes of care, treatment, and services.
- You have the right to access and receive an accounting of disclosures regarding your own health information as permitted by law.

- 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 Advocate at **610-988-8663**. You have the right to contact the Pennsylvania Department of Health, PO Box 90, Harrisburg, PA 17108. *Phone:* **800-254-5164**.
- You have the right to contact Hospital management if a concern you have about patient care or safety has not been addressed. If your concerns cannot be resolved through the Hospital, you may also contact the Joint Commission. *Phone:* **800-994-6610**. *Email:* **complaint@jointcommission.org**

Our Responsibilities to You

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

- We will provide the best health care possible in a safe, clean, quiet, and pleasant environment.
- We will provide education to help patients and their families understand the illness, what they can do about it, and, when possible, how to stay healthy after recovery.
- We will provide you with options for treatment that may be needed at another facility, as an outpatient, or at home.
- We will provide mental health, spiritual, and social services if requested by you or your doctor.
- 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.
- We will provide a Patient Advocate to receive suggestions on how we can improve our services.
- We will provide you with a Patient Information booklet to help

Your Responsibilities to the Hospital

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

- Please keep your appointments with us.
- Please play an active role in your care.
- 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.
- Please tell your doctor and healthcare team about any changes in your health, including any pain you may be experiencing.
- Please report any concerns you may have regarding your safety to any member of your healthcare team or to Hospital management. If your concern cannot be resolved by the Hospital, please contact the Joint Commission. *Phone:* **800-994-6610**.
  Email: **complaint@jointcommission.org**
- Please be considerate of our other patients by following our guidelines on the number of visitors, visiting hours, noise level, and tobacco-free environment. Please be sure that your visitors are considerate also.
- Please help us protect confidentiality and personal privacy – yours and that of our other patients.
- Please provide the benefits plan information necessary to process your Hospital bill.
- 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.
- When an adult patient is unable to exercise these rights, that patient's legally responsible representative may exercise these rights on behalf of the patient.

Revised 12.10

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 Advocate (write to The Reading Hospital and Medical Center, PO Box 16052, Reading, PA 19612-6052, or call 610-988-8663.)

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

located at: Sixth Avenue and Spruce Street, West Reading

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