



1400 Mercy Drive, Suite 150 Muskegon, Michigan 49444-1836

231 733-7800 phone 231 733-7801 fax

www.muskegonsurgerycenter.com

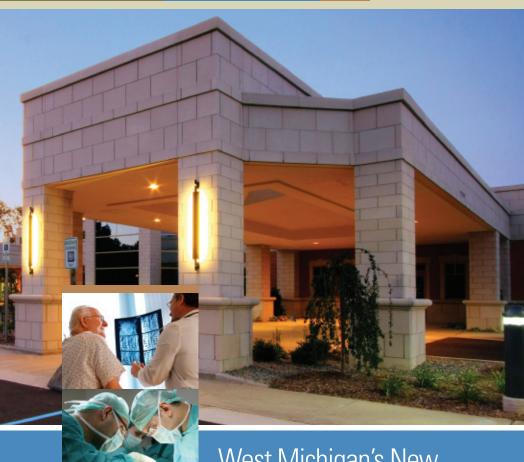
Julie K. Greene Chief Executive Officer

231 332-3001 direct phone juliegreene@muskegonsurgerycenter.com



1400 Mercy Drive, Suite 150 | Muskegon, Michigan 49444-1836





West Michigan's New Outpatient Surgery Center



Thank You for Choosing Muskegon Surgery Center

Welcome to Muskegon Surgery Center, West Michigan's new, state-of-the-art outpatient surgery center. Our facility is a safe and convenient alternative for a wide variety of procedures. We offer the latest in medical technology in a beautiful setting designed to create a calm, comfortable environment for our patients and their loved ones.

Specialties include general surgery, orthopedic surgery, plastic and reconstructive surgery, gynecology, ophthalmology, otolaryngology (ENT), urology, podiatry and pain management. Our physicians must meet stringent



credentialing and privileging criteria to be a member of our medical staff. Nurses, technicians and support staff are highly experienced and well trained to provide optimal patient care while addressing individual needs. All appointments are scheduled in advance and because we manage all scheduling at our facility, we are able to avoid delays and interruptions due to other surgeries or emergency cases.

Our location is easily accessible from highways US-31 and I-96, with convenient parking for patients and others traveling with them.





Prior to Your Surgery

You will receive two calls from our office prior to your surgery. Our clinical staff will contact you to review your health status, go over pre-operative instructions, and identify any special needs you may have. Our business office will also call to discuss your insurance and/or payment options. We are always available to answer your questions or find the answers for you, and we encourage you to tell us if there is anything you do not understand or if you would like us to explain something in more detail.

The Day Before Your Surgery

Please bathe or shower the night before or the morning of surgery to minimize the risk of infection. You should also brush your teeth, but do not swallow any water. Please refrain from smoking after midnight the night before surgery.

The Day of Surgery

Unless otherwise instructed by our nurses, we recommend that you arrive at Muskegon Surgery Center one hour before your scheduled appointment time to allow for registration and a nursing evaluation. If your physician has given you medical records or other documents related to your surgery, please bring them with you.

On the day of surgery, wear comfortable clothing that can be easily removed. Do not wear jewelry other than a simple ring or watch. If you wear contacts, bring a lens box and your glasses.

Please bring your driver's license and your current insurance card with you. If



you do not have a driver's license another form of photo identification will be required.

Please bring all of your medications with you in their original containers.

If you are taking any medications, including pain pills, you should take them as instructed by your physician. However, drink only a small sip of water if you need to take medication within four hours of your arrival time. If your medications include blood thinners, you will need to discuss this with your surgeon prior to your surgery. Please call us at 231-733-7800 if you have not discussed blood thinners with your surgeon before the day of your surgery.

If you are pregnant or could possibly be pregnant, please notify us immediately upon arrival. Taking several different medications and/or the use of radiation may harm your developing fetus.

It is important to have at least one person accompany you when you come for surgery, but please remember that space is limited and other people will also be waiting for patients.

Discharge and Returning Home

Following your procedure, Muskegon Surgery Center nursing staff will review your discharge instructions with you and those who accompany you to the center. You will also receive a copy of these instructions to take home. You should take this opportunity to ask any questions regarding your post-discharge and recovery care.

For the public's safety as well as your own, Muskegon Surgery Center requires you to have someone drive you home after surgery unless your surgeon and the management have pre-approved other arrangements. Some procedures, anesthesia and medications may impair your ability to drive safely for a period of



time following surgery. If you do not have a ride, or if your physician and Muskegon Surgery Center management have not given prior approval to drive yourself or take public transportation, your appointment will be cancelled.

You should have a responsible person stay with you after surgery, including the first night after you return home.

If you feel you have an emergency after you return home, you should immediately call your physician's office or go to the hospital emergency room.

Surgery Costs and Payment

Costs for surgical services other than your deductible, co-pay and/or co-insurance are usually covered by most healthcare plans. We will submit claim forms directly to all third party payors on your behalf; however, we expect you to work directly with your carrier to have your claim addressed. All deductibles and co-pays are due the day of your surgery. We will contact you in advance to notify you of the amount due.

This amount is an estimate only. The actual cost of your surgery depends on the exact procedure(s) done in the operating room and any implants used.

Your payment to Muskegon Surgery Center is for the facility fee only. You will receive separate bills for surgeon services, anesthesia, lab services, durable medical equipment such as crutches and slings, and diagnostic services, as applicable.

Our office personnel are happy to answer questions regarding charges and/or payment, and will work with you to make payment arrangements before your surgery.

We accept MasterCard, VISA and Discover Card as well as payment in cash or by check.



Driving Directions

FROM THE EAST: Take I-96 west to US-31 north to the Sherman Boulevard exit (exit 112). Turn left (west) on Sherman Boulevard and go approximately 1/4 mile to Roberts Street (2nd traffic signal). Turn right on Roberts Street and go approximately 1/4 mile to Mercy Drive. Turn right on Mercy Drive and go approximately 1/4 mile to the Muskegon Surgery Center entrance on the left.



FROM THE SOUTH: Take US-31 north to the Sherman Boulevard exit (exit 112). Turn left (west) on Sherman Boulevard and go approximately 1/4 mile to Roberts Street (2nd traffic signal). Turn right on Roberts Street and go approximately 1/4 mile to Mercy Drive. Turn right on Mercy Drive and go approximately 1/4 mile to the Muskegon Surgery Center entrance on the left.

FROM THE NORTH: Take US-31 south to the Sherman Boulevard exit (exit 112). Turn right (west) on Sherman Boulevard and go approximately 1/4 mile to Roberts Street (next traffic signal). Turn right on Roberts Street and go approximately 1/4 mile to Mercy Drive. Turn right on Mercy Drive and go approximately 1/4 mile to the Muskegon Surgery Center entrance on the left.



Muskegon Surgery Center – Patient Responsibilities

- It is the PATIENT'S responsibility to read and understand all permits and/or consents to be signed. Patients should ask either the nurse or physician to clarify any information not understood about their care or services.
- It is the PATIENT'S responsibility to provide complete and accurate information to the best of his/her ability about his/her health, any medications, including over-the-counter products and dietary supplements, and any allergies or sensitivities.
- It is the PATIENT'S responsibility to notify Muskegon Surgery Center if they have a living will, medical power of attorney or other directive that could affect their care.
- It is the PATIENT'S responsibility to follow the treatment plan prescribed by his/her provider and to notify Muskegon Surgery Center on admission if pre-operative instructions have not been followed.
- The PATIENT is responsible for his/her actions if they refuse treatment or do not follow pre-operative instructions.
- It is the PATIENT'S responsibility to provide adult transportation to and from Muskegon Surgery Center, and to arrange for a responsible adult to remain with them for 24 hours after they leave the center, appropriate to the medications and/or anesthesia to be given according to pre-operative instructions.
- It is the PATIENT'S responsibility to follow the post-operative instructions given by the physician(s) and/or nurses. This includes instructions regarding post-operative appointments.
- It is the PATIENT'S responsibility to contact the physician if any complications occur.
- It is the PATIENT'S responsibility to ensure that all payments for services rendered are made on a timely basis. The patient is ultimately responsible for payment, regardless of insurance coverage.
- It is the PATIENT'S responsibility to provide financial and/or insurance information regarding who will be responsible for the bill including current address and authorized contact information.
- It is the PATIENT'S responsibility and those accompanying the PATIENT to be respectful of all health care providers and staff, as well as other patients, and to follow the Center's policies.



It is the PATIENT'S responsibility to notify the administration of Muskegon Surgery Center if the PATIENT or the PATIENT REPRESENTATIVE thinks their right(s) have been violated or if the PATIENT has a suggestion, comment or complaint.

Complaints should be directed to: Julie Greene Muskegon Surgery Center CEO 1400 Mercy Drive, Muskegon, MI, 49444 1-231-733-7800

PATIENTS and/or PATIENT REPRESENTATIVES should contact the office of the Medicare Beneficiary Ombudsman at www.cms.hhs.gov/center/ombudsman.asp or the State of Michigan Representative if they have a concern or complaint about Muskegon Surgery Center. Anyone may file a complaint against a licensed or certified health care facility by:

- Submitting the BHS Online Complaint Form on the Internet at http://www.michigan.gov/bhs by clicking "Health Systems & Licensing" (button in lefthand column), "Featured Services", form title (in center of page),
- Completing and mailing a Health Facility Complaint Form (BHS-0PS-361)—for health facilities other than nursing homes (see Facility Types Investigated By MDCH, BHS below),
- Submitting a letter with at least the required complaint information shown above,
- Calling the toll-free Complaint Hotline at 1-800-882-6006 to file an oral complaint or to inquire about filing a complaint.

Mail written complaints to:
Michigan Department of Community Health
Bureau of Health Systems, Complaint Investigation Unit
P. O. Box 30664
Lansing, MI 48909
Fax: 517-241-0093

Muskegon Surgery Center – Patient Bill of Rights

- The PATIENT has the right to be treated with consideration, dignity and respect.
- The PATIENT and/or the PATIENT REPRESENTATIVE has the right to all complete and current information concerning their diagnosis and treatment in terms that he/she can understand. The PATIENT has the right to know the person or persons responsible for coordinating their care. If not medically advisable to give information to the patient, the information shall be made available to an appropriate person on the patient's behalf.
- The PATIENT has the right to receive enough information from the physician so that he/she can understand the services being rendered in order to sign the informed consent.
- The PATIENT has the right to refuse treatment and to be informed of the consequences of his/her actions.
- The PATIENT has the right to change their provider if other qualified providers are available.
- The PATIENT has the right to privacy of any information or treatment concerning his/her own medical care.
- The PATIENT has the right to be informed of any persons other than routine personnel who will observe or participate in his/her treatment, and to refuse that observation and/or participation.
- The PATIENT has the right for all medical records to be treated as confidential, and to be given the opportunity to approve or refuse their release unless this would cause a negative outcome in the continuation of medical care.
- The PATIENT has the right to information concerning the facility to which he/she may have to be transferred. The facility to receive the patient must give approval prior to the patient transfer.
- The PATIENT has the right to know if any research will be done during his/her treatment and has the right to refuse it.
- The PATIENT has the right to expect quality care and service from Muskegon Surgery Center.
- The PATIENT has the right to be informed about the mechanism by which he/she will have continuing health care following discharge from Muskegon Surgery Center.
- The PATIENT has the right to examine and receive an explanation of their bill, regardless of the source of payment.
- The PATIENT has the right to know, in advance, the expected amount of his/her bill, regardless of the source of the payment.
- The PATIENT has the right to know which Muskegon Surgery Center rules and regulations apply to his/her conduct as a patient.

Non-Discrimination Policy

Muskegon Surgery Center provides for admission and services without regard to race, color or national origin, or on the basis of disability or age. If you have a specific question, comment, suggestion or complaint, please do not hesitate to contact Julie Greene, Muskegon Surgery Center CEO at 1-231-733-7800.

Muskegon Surgery Center – Pediatric Patient Bill of Rights

All children have a right to cry, laugh, or be made comfortable if it helps them feel better. They also have a right to:

- Ask to have a parent or another adult stay with them during their pre-surgical examination.
- Tell their caregiver when and where something hurts.
- Ask questions if they don't understand a medical procedure or what's happening to them.
- Choose which ear should be looked at first, or which arm to have an injection in, if needed.
- Ask for something to ease their pain.
- Listen to music, play a game or read a book to help distract them during medical procedures.
- Have an adult with them when they ask, except when the presence of another person would or may impact their care and cause a negative outcome.
- To have a schedule for procedures that doesn't keep them hungry or thirsty any longer than necessary.
- To always be called by their name.

Muskegon Surgery Center Ownership

Muskegon Surgery Center is a limited liability corporation owned by Mercy Health Partners and area physicians, including Christopher Eyke, MD; Daniel Fett, DO; Brian Gluck, MD; Yousif Hamati, MD; Frederic Levin, DO; Mark Moulton, MD; Richard Moulton, MD; Jeffrey Recknagel, MD; Joseph Salisz, MD; Brian Stork, MD; Anthony Wilson, MD and Stephen Zonca, MD. Because new physician owners are added periodically, please contact your physician if you are interested in knowing if they have ownership in Muskegon Surgery Center.

Advanced Directives and Living Wills

Muskegon Surgery Center has the purpose of being an ambulatory surgery center to provide elective surgical procedures to stabile patients. Therefore, the Board of Managers and the Medical Staff have elected not to recognize and/or provide patient care during admission to the center in accordance with either the patient's advanced directives or living will. Feel free to bring your advanced directives documents with you to the center and we will be happy to put them in your chart in the event you need to be transferred to another facility in an emergency. Muskegon Surgery Center also has advanced directives information and documents available upon request at the reception desk.

Privacy Statement

Our Privacy Statement is available for you to view on our website at www.muskegonsurgerycenter.com.



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Home About Us About Your Surgery Forms & Policies Contact Us Map/Directions



State of the Art Outpatient Surgery

Welcome

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Our Mission

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News & Events

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read more

Muskegon Surgery Center 1400 Mercy Drive, Suite 150 Muskegon, Michigan 49444-1836

> phone 616 822-1877 fax 616 822-1877

> > website policies

Patient Satisfaction Survey

Thank you for choosing Muskegon Surgery Center for your recent surgical procedure. We are committed to delivering excellent care to our patients, and would appreciate your feedback about your experience at our facility. Please take a few moments to fill out our patient questionnaire including suggestions about how we can improve our service in the future.

Date of Procedure:	
Surgeon's Name:	
Your Name (optional):	

Thank you for completing this survey.

Please fold, seal and return to us. Postage has been pre-paid.



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Patient Satisfaction Survey

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ADMITTING
Was the pre-surgical phone call helpful in preparing you for your surgery? ☐ Yes ☐ No ☐ NA
Were you greeted in a timely manner when you arrived the day of your surgery? \square Yes \square No \square NA
Was your pre-admission paperwork processed in a timely manner? \Box Yes \Box No \Box NA
If you had to wait, was the reason for the wait explained to you? ☐ Yes ☐ No ☐ NA
Other comments about admitting:
BEFORE YOUR PROCEDURE
Was your privacy maintained during your "pre-operative" phase? ☐ Yes ☐ No ☐ NA
Was the sequence of events explained clearly? $\hfill \Box$ Yes $\hfill \Box$ No $\hfill \Box$ NA
Did our staff introduce themselves and make you feel at ease? \Box Yes \Box No \Box NA
Other comments about your pre-operative care

	PROCEDURE	
	al anesthetic, was the dminister the anesthetic ly?	
	neral anesthetic, was the dminister the anesthetic ly? NA	
during your pro	ed with privacy and respo cedure?	ect
Other comment procedure:	s about your care during	your
RECOVERY AN	D DISCHARGE	•••
your recovery?	ttentive to your needs du	ring
□ Yes □ No	I I KI A	
	⊔ NA	
	relief needs adequately overy?	met
Were your pain during your rec □ Yes □ No	relief needs adequately overy?	
Were your pain during your rec □ Yes □ No Were your disc	relief needs adequately overy? NA	
Were your pain during your rec Yes No Were your disc understand? Yes No Were all of your your discharge	relief needs adequately overy? NA harge instructions easy t NA r questions answered pri	0
Were your pain during your rec ☐ Yes ☐ No Were your disc understand? ☐ Yes ☐ No Were all of you	relief needs adequately overy? NA harge instructions easy t NA r questions answered pri	0

Other comments about your recovery and discharge:
OTHER
Was our facility clean and comfortable? ☐ Yes ☐ No ☐ NA
Were your financial arrangements discussed in a way that was courteous and easy to understand? ☐ Yes ☐ No ☐ NA
Did you receive a follow-up call from our staff after your visit? \Box Yes \Box No \Box NA
If not, did you receive a follow-up letter? \square Yes \square No \square NA
Were you satisfied with the care you received from your surgeon? \square Yes \square No \square NA
Were the needs of the people who accompanied you to the surgery center adequately met? ☐ Yes ☐ No ☐ NA
Would you return to Muskegon Surgery Center for outpatient surgery in the future? \square Yes \square No \square NA
Other overall comments:



☐ Yes ☐ No ☐ NA