

Patient Information Resource Guide

WELCOME TO ST. LUKE'S EPISCOPAL HOSPITAL

St. Luke's Episcopal Hospital wants to make your healthcare experience with us more streamlined for you and your family.

That's why we've created this *Patient Information Resource Guide*, which is intended to help you through the patient admission process.

Before you are scheduled for surgery, we recommend that you contact your insurance provider to learn if authorization for your surgery is required. Your health insurance provider also can provide information about any outstanding deductibles, co-payments and other patient portion responsibilities.

You may choose to visit St. Luke's Pre-Admission Testing Center immediately following your doctor's appointment. The Center operates on a first-come, first-served basis; however, you can decrease your time in Pre-Admission Testing if you obtain pre-certification and pre-registration with St. Luke's prior to your visit to the Pre-Admission Testing Center.

Thank you,

St. Luke's Episcopal Hospital

STEP ONE: Pre-Certification/Authorization

Pre-certification, which should be completed before visiting St. Luke's Pre-Admission Testing Center, means providing St. Luke's with information regarding insurance coverage so that an insurance claim can be filed on your behalf.

Depending on the insurance provider or healthcare coverage, an authorization may be required for surgery. Authorization for a service or procedure must be initiated by your physician's office. If so, speak with your surgeon's office or your insurance company about any requirements at the time you schedule your surgery. Also, obtain confirmation of any outstanding deductibles, co-payments and any other financial responsibilities.

Patients can pre-certify by calling St. Luke's Call Center at 832-355-0000 or by visiting www.stluketexas.com. You may receive a call regarding your medical history, so please respond.

STEP TWO: Pre-Registration

Once you have received pre-certification, pre-registration is the next step. Pre-registration provides St. Luke's with information about you (name, address, phone number, etc).

NOTE: We strongly recommend that you visit the Pre-Admission Testing Center at least three business days before your surgery to allow adequate time to process any test results.

Patients can pre-register by calling St. Luke's Call Center at 832-355-0000 or by visiting www.stluketexas.com.

STEP THREE: Registration and Pre-Admission

To expedite your Pre-Admission Testing Center visit, please bring the following:

- insurance card to verify coverage
- all paperwork provided by surgeon's office
- physician's orders
- list of current medications and allergies
- payment, if necessary for deductible or co-payments
- pre-operative education about your surgery

Things to Know

When and Where your surgery is scheduled:

- St. Luke's Episcopal Hospital Day Surgery Center (6720 Bertner Ave.)
- The O'Quinn Medical Tower at St. Luke's Same Day Surgery Center (6624 Fannin)

Date of Surgery:

Arrival Time:

Surgery Time:

Billing

Understanding Your Bill

As an inpatient or outpatient at St. Luke's, you will receive separate bills from the hospital and your physician.

St. Luke's Billing

The bill you receive from St. Luke's will list all hospital services including tests (labs, X-rays, EKG), procedures and supplies. Professional services provided by your physician are NOT included in the St. Luke's bill. Please review your hospital bill before paying. Questions regarding your bill may be directed to Patient Financial Services at 832-355-3081.

Physician Billing

Your physician, other physicians who provided services, conducted tests or procedures, and any consulting physician(s) asked to read and interpret test results will send you individual bills for their professional services. Specialists, in areas such as, anesthesiology, cardiology, emergency medicine, nuclear medicine, pathology, radiology and urodynamics (urology) all send separate bills.

These professional bills are from physicians and not from St. Luke's. You are responsible for paying both physician bills and your St. Luke's bill.

Important Numbers

For questions related to physician billing, contact your physicians' office listed on the billing statement. The following are some commonly requested numbers:

Diagnostic Radiology Specialists

Singleton Associates, P.A.
713-621-8795
Outside Houston: 1-800-444-0221

Anesthesia Specialists (All Surgery, except Cardiovascular)

Greater Houston Anesthesiologists
713-620-4040
Outside Houston: 1-800-556-4004

Emergency Room Specialists

Medical Center Emergency Physicians
713-838-0800

Anesthesia Specialists (Cardiovascular Surgery)

Arthur S. Keats, MD & Associates
832-355-2666

Pathology Specialists

Gulf Coast Pathology Associates (GCPA)
1-800-213-3578

Anesthesia

Anesthesia is a medication that causes you to become unconscious or sleep during surgery. While under anesthesia, you will not feel pain, are unaware of the surgery and usually do not dream.

General anesthesia is administered by specially trained physicians, known as anesthesiologists, or by a team consisting of an anesthesiologist supervising a nurse anesthetist.

Role of Anesthesiologist

The anesthesiologist will review your medical record to learn the:

- nature of your present problem to determine the type of anesthesia to use
- history of other medical problems that may affect the anesthesia
- results of any testing
- medications you are taking to avoid any drug reactions with the anesthesia
- need for special arrangements, such as special monitoring equipment, etc.

Types of Anesthesia

You will be informed of the type of anesthesia to be used during your procedure and the reason. The types are as follows:

- Local: a needle is used to inject an anesthetic in the area to make it numb.
- Regional (Nerve): a needle is used to anesthetize the nerves in a specific area where the surgery is being performed or by administering a spinal anesthetic, which anesthetizes the abdomen and legs.
- General: you are put to sleep by having an anesthetic injected into your vein or by inhaling an anesthetic vapor.

Pediatric Anesthesia

Are the anesthesia risks different between children and adults?

Yes. Respiratory complications are more frequent in the pediatric population. Injury to the nervous system is more common in adults and the risk of anesthesia in children is still very low.

How will my child be put to sleep?

The age and maturity of your child will aid in the anesthesiologist's decision about the type of anesthesia to administer. With younger children, the most frequent type of induction (putting one to sleep) is inhalation of an anesthetic vapor.

Inhalation induction allows the child to breathe themselves off to sleep with oxygen, nitrous oxygen (laughing gas) and anesthesia gas. Older children may receive an IV induction because it's a faster way to go to sleep. However, if an older child is afraid of the IV or needles, an inhalation will be considered a viable option.

What will you do if my child is anxious before surgery?

Medications are available that will calm your child by sedation prior to the start of the anesthesia. These medications are similar to Valium, but are short-acting and can be given by mouth or through an IV. The anesthesiologist will determine what is best after consulting with the parent or guardian.

Day of Surgery

DO:

- Bring one family member with you to the pre-operative area before surgery.
- Bring a list of all medications you are currently taking and a list of allergies (unless this information was provided during your visit to the Pre-Admission Testing Center). Check with your physician about taking any medications before your procedure.
- Wear comfortable, loose clothing to allow room for possible bulky bandages.
- Bring a pillow, blanket and towel; however, leave them in the car for your comfort going home.
- Pack an overnight bag, in the event it is necessary for you to stay the night at the hospital.
NOTE: You must leave it in your car until needed.
- Bring your CPAP machine if you have sleep apnea.

DON'T:

- Eat or drink anything after midnight, not even water. This includes gum, mints and hard candies.
- Smoke
- Wear makeup, especially eye makeup or nail polish.
- Bring:
 - valuables (jewelry, money, credit cards, laptops or expensive clothing) with you to the hospital. **Exception:** admission deposit, if required, for your surgery.
 - additional belongings, especially wheelchairs. You may bring a wheelchair only if you are going home the same day after your surgery.
 - cell phones, which are not allowed due to possible interference with medical equipment.

What to Expect

Before Entering the Operating Room

You:

- ▣ will have intravenous fluids (medicines and anesthetics).
- ▣ may be given medicine that makes you feel drowsy.

In the Operating Room

You will:

- ▣ be moved to the operating table and properly positioned.
- ▣ have a blood pressure cuff placed on your upper arm; EKG stickers placed on your chest and an oxygen monitor placed on your finger for the anesthesiologist to monitor your heart rate, blood pressure and breathing while under anesthesia.
- ▣ be given extra oxygen through an anesthesia mask and an anesthetic medication in your intravenous access.

During Surgery

The anesthesia team will monitor your:

- ▣ breathing
- ▣ heart rate and circulation
- ▣ kidney function
- ▣ temperature

Recovery Room

- The anesthesia team will accompany you to the recovery room, where they will update the recovery room nurse about your surgery.
- Your blood pressure, heart rate and oxygen level will continue to be monitored by the team.
- After you wake-up, you will be asked about your pain level (scale of 1 to 10) to assist in addressing your pain.
- You will be able to leave the recovery room when your blood pressure, pulse and breathing are stable and your pain is under control. If you are going home the same day, you must be alert; able to walk (with minimal assistance); able to drink fluids and urinate before you are discharged.

After Surgery

- After surgery, you will spend approximately two or more hours in the Recovery Room. One family member is allowed to stay with you once you have completed the initial recovery phase.
- Have a pillow, blanket and towel in the car for your comfort going home.
- Continue to drink liquids after you arrive home and then gradually advance to solid foods, unless otherwise instructed.
- Take it easy the day after surgery, avoid any strenuous activity and follow all surgeon's instructions.
- Avoid spicy or greasy foods and do not attempt to cook within 24 hours after surgery.
- Do not make any important decisions.
- Do NOT drive or operate machinery within 24 hours after surgery. You MUST have someone to drive you home upon discharge. You will NOT be permitted to drive yourself or take public transportation. You will be allowed to take a taxi if you are accompanied by an adult.
- You are encouraged to have someone stay with you the first 24 hours after discharge from the hospital.
- Expect a phone call from a St. Luke's staff member following your surgery to discuss your post-operative health.

Pain Management

Pain is your body's alarm. After a surgical procedure, you may experience different levels of pain due to nerves near the surgical site sending signals to the brain. Fear and anxiety seem to make pain worse. That's why it's important to ask questions before surgery. Knowing what to expect can make the pain a bit easier to manage.

Everyone feels and reacts differently to pain. Only you know how you really feel. It can be a throbbing, burning or nagging feeling. No matter what your pain feels like, medications and relaxation techniques can help you feel better.

Use a pain scale to describe how you feel. After surgery, a pain scale is a tool used to monitor pain level with 0 being no pain and 10 being the worst pain possible. You will be asked to rate your pain using this scale.

Pain-control measures can make help your recovery more comfortable. Since pain-free surgery isn't a reality yet, communicate with the medical staff and accept pain medications that are available for short-term use.

Reducing post-operative pain. Post-operative pain medications are often provided at the patient's request. In fact, when pain is kept a reasonable level, patients usually recover sooner. With the help of pain medications, patients can sit up or even walk within hours of surgery. These activities reduce some surgical risks, such as blood clots and pneumonia. Less pain means less stress on the body and mind. When relaxed, blood flows more easily and healing is quicker.

Learn your pain triggers. Think about what causes you pain or makes it worse. For instance, you may find that certain movements make you hurt, such as getting out of bed or walking. Tell your doctor or nurse about any pain triggers you notice.

Taking post-operative medications. Your physician will choose a method of post-operative medication based on your surgery, the amount of pain you're feeling and your phase of recovery. Take your medication as directed. If your pain is NOT relieved or worsens, contact your physician. Remember to time your medication before beginning an activity, such as dressing or sitting for long periods of time; eat lots of fruit and vegetables and drink plenty of liquids (helps reduce constipation—a common side effect of some pain relievers).

Parking

Valet and self-parking entrances for The O'Quinn Medical Tower at St. Luke's are on Fannin Street. When self-parking, take the parking garage elevators to the first floor; then transfer to the elevator near the security desk and go to the 12th floor. The Pre-Admission Testing Center is located in Suite 1280. Remember to bring your parking garage ticket with you so the receptionist can apply a discount voucher.

NOTE: Parking is only validated for The O'Quinn Medical Tower garage and TMC Garage #2. We do NOT validate for TMC Garage #1, Alright Parking, Scurlock Towers or other area lots.

