

A MESSAGE

FROM OUR CEO

Thank you for choosing Southside Regional Medical Center for your health care needs and welcome to our facility. We are committed to providing you with the very best service. Our goal is to not only meet your expectations but to exceed them.

If you have any questions or concerns during your stay, please do not hesitate to tell your nurse, the nurse manager of the unit, or contact Ava Warren, our Director of Patient Relations. Ms. Warren can be reached at 765.5066, but if you are calling from your patient room, simply dial extension 5066.

Following your stay at the hospital, you may receive a patient satisfaction survey by phone. Please take the time to speak with the surveyor and answer the questions honestly. Let us know if we exceeded your expectations or how we might improve our services in the future.

Again, thank you for allowing Southside Regional Medical Center to serve you and I wish you a speedy recovery.



MICHAEL J. YUNGMANN, CHE
CHIEF EXECUTIVE OFFICER



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*Our mission is to provide
extraordinary healthcare
for patients and their
families, provide a center
of excellence for physicians
to practice medicine, and
create a vibrant workplace
for employees.*



Service.
People.
Growth.
Finance.
Quality.

At Southside Regional Medical Center it is our goal to treat our patients with respect, with clear communication and exceptional customer service. If you have experienced or observed this kind of care, we want to recognize our team member(s) who provided this outstanding care.

Nominee's name and department

was caught in the act of caring by (your name, optional):

He/she went above and beyond the call of duty by:

Our mission is to provide extraordinary healthcare for patients and their families, provide a center of excellence for physicians to practice medicine, and create a vibrant workplace for employees.

Key Performer.



DESIGNATED CONTACT PERSON

OF SRMC PATIENTS

NAME

RELATIONSHIP

HOME PHONE

WORK PHONE



**Protecting
Your Privacy**

HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT (HIPAA)

HIPAA is the law that requires Southside Regional Medical Center to make sure that medical information about you is kept private. We understand that medical information about you and your healthcare is personal and we are committed to protecting medical information about you. HIPAA limits what patient information may be released in response to a verbal request (including telephone). We ask that you give careful consideration to designating a contact person.

I understand that the above named person is the contact person. The contact person will receive all calls for information and may call in to the nursing unit for updates by providing the designated I.D. Code Number. I understand that I have the right to limit the type of information released.

Patient Signature

IF PATIENT IS UNABLE TO SIGN, SIGNATURE OF PERSON
AUTHORIZING RELEASE OF INFORMATION

Date

DO NOT RELEASE THE FOLLOWING INFORMATION:

1. _____
2. _____
3. _____
4. _____
5. _____

MEALS + NUTRITION

The Food and Nutrition Services Department of SRMC makes every effort to provide nutritious meals prepared to your satisfaction. Our goal is to provide wholesome, nourishing and well-balanced meals that will aid in your treatment and recovery.

PATIENT SERVICES

Your meals are prepared fresh daily ensuring the finest quality. We are committed to doing everything possible to make your mealtime pleasant. Meal service hours are from 6:30 a.m. to 6:30 p.m. Dial FOOD or 3663 to order your meals.

ROOM SERVICE MENU

Southside Regional Medical Center is committed to your comfort and your complete satisfaction with our food service. As part of this commitment, we provide a complete room service program with a restaurant-style menu and the availability to speak with a Food Service Representative. We offer a wide range of hot and cold breakfast items, along with lunch and dinner selections available for your afternoon and evening meals. The menu also reflects which items are appropriate for the particular dietary restrictions you may be under at your physician's request.

To assure your safety, we will accept your menu selections after your physician has ordered your diet.

When you are ready to eat, simply dial FOOD or 3663 to order your selections from the menu provided. Your Food Service Representatives are available to receive your menu selection from 6:30 a.m. to 6:30 p.m. If you cannot place your order, you can ask a family member or staff to assist you.

It is important to consult your nurse when ordering your meal to work around treatment and therapy schedules.

Please note that not all menu items are appropriate for all diets. A Food Service Representative will assist you in making appropriate choices. As you decide what you would like to eat, please keep in mind the following:

- Eat more fresh fruits, vegetables and whole grains.
- Avoid fried foods and added fats like salad dressing, mayonnaise and margarine.
- Limit total fat to less than 30% of total calories and saturated fats to less than 5% of total calories.
- Limit red meat and egg yolks and eat more poultry and fish.
- Eat more low-fat/fat-free yogurt.
- Limit sweets with saturated/hydrogenated fats.
- Exercise regularly to promote a healthy weight and fitness level.

GUEST MEALS

Your guests may wish to dine with you at bedside. For this reason, the daily menu is offered at a nominal cost. Please check with your nurse or host/hostess to order guest meals.

GUEST AND VISITOR SERVICES

The Southside Café is located on the first floor, adjacent to the

main lobby, and serves three meals and a snack each day for visitors and staff. Breakfast is served 6:15 a.m. to 9:45 a.m., lunch is served 11:00 a.m. to 2:00 p.m., snack is served 2:30 p.m. to 3:30 p.m. and dinner is served 4:30 p.m. to 6:30 p.m.

NUTRITION CONSULTATION

The Clinical Dietitians are members of the healthcare team who care for your nutrition needs. The dietitians are available to answer questions, provide personalized diet consultations (24-hour notice required) and/or arrange for an outpatient appointment after discharge.

Commonly Asked Questions...

HOW DO I GET A MENU?

Menus will be issued upon admission to your room and can also be provided to you by nursing staff or dietary hosts/hostesses. If you have any questions about your menu or diet, please contact your dietary host/hostess or dial FOOD (3663).

WILL MY MEALS TASTE BLAND?

Not at all - our cooks work hard to make your food tasty and enjoyable. Your medication and/or diet restrictions may alter your taste buds. However, you may request additional salt, pepper or a special seasoning packet if your diet allows.

WHAT IF I GET HUNGRY BETWEEN MEALS?

There are items available on each patient care unit if you should desire a snack between meals. Items available include graham crackers, peanut butter, crackers, Lorna Doone cookies, juice and soft drinks. Please check with your nurse to request a snack.



Nourishing Your Body

WE WELCOME YOUR COMMENTS

You may receive a questionnaire inquiring about our service during your stay. Please take a few minutes to complete the survey. Your feedback is very important to us so that we can continue to improve our food and service to you. If you do not feel that you can rate our service as very good, please ask to speak with a member of the Food and Nutrition Services team so that we may address your concerns.

IT'S OK TO ASK

PROPER HAND HYGIENE -
IT'S EVERYONE'S RESPONSIBILITY

An education program intended to help you become an active and informed member of your family's healthcare team by teaching you how proper hand hygiene (the cleaning of hands) can protect you from the germs that cause infections.



HERE ARE A FEW REASONS WHY HAND HYGIENE IS SO IMPORTANT TO YOUR CARE:

- Germs are everywhere.
- Sick people get infections easier.
- Infections can keep patients in the hospital longer.
- Even healthy people can spread germs.
- Good hand hygiene is a healthy habit.

Both soap & water and waterless alcohol hand rubs are extremely effective at reducing the number of germs present on the skin.

WASHING WITH AN ALCOHOL HAND RUB SHOULD BE DONE BY EVERYONE

- When entering your room or before touching or administering care to you or your loved one.
- Upon leaving your room, if they have touched you or any object in the room.

IN ADDITION, SOAP & WATER MAY BE USED

- When hands are visibly dirty.
- When hands are soiled with blood or other bodily fluids.
- After visiting a restroom.
- Before and after eating.

THREE STEP WATERLESS PROCEDURE

1. Apply 1 pump alcohol hand rub or foam.
2. Spread hand rub or foam thoroughly over hands.
3. Rub hands together until dry.

PROPER HAND WASHING PROCEDURE

1. Wet hands with water.
2. Apply 1 pump soap.
3. Lather & wash for at least 15 seconds.
4. Rinse both sides of hands with water.
5. Dry hands and shut faucet off with towel.

Everyone caring for you should clean their hands. If you do not see the doctor, nurse or other healthcare provider clean their hands with soap and water or use a waterless alcohol hand rub when entering your room to provide care, remember...IT'S OK TO ASK.

Be an active participant in the hand hygiene process. It only takes a few simple words to help encourage this healthy habit:

- "Excuse me, did you clean your hands?" -or-
- "I saw that you cleaned your hands - thank you!"

Practicing good hand hygiene is the single most important thing you can do to stop the spread of infection. It's a healthy habit for anyone, whether you are in the hospital, at work, or at home.

And remember, **IT'S OK TO ASK** someone to clean their hands...your health may just depend on it.

**Hand Washing
and Hygiene
is Important**



ABOUT PAIN

A GUIDE TO UNDERSTANDING PAIN MANAGEMENT

People used to think that severe pain was something they “just had to put up with,” but with current treatments that is no longer true. Pain can be controlled so you feel more comfortable. At Southside Regional Medical Center you can work with your nurses and doctors to prevent or relieve pain. When skin and internal tissue are irritated, damaged, or cut, nearby nerves send signals up the spinal cord to the brain. Fear and anxiety increase the signal, making pain seem worse. Ask questions so you know what to expect. This will help you be less afraid and more in control which will make pain easier to handle.

You are the key to getting the best pain relief because pain is personal. The amount or type of pain you feel may not be the same as others feel, even those who have had the same procedure, surgery, or medical condition. Current pain control measures can make your recovery more comfortable. You can take an active role by asking what to expect, talking with your doctor, and accepting available pain medications. Do not worry about getting “hooked” on pain medicine. Studies have shown that the short-term use of pain medication is not addictive unless you already have a problem with drug abuse.

PAIN CONTROL CAN HELP YOU:

- Enjoy greater comfort while you heal.
- Get well faster. With less pain, you can start walking, do your breathing exercises, and get your strength back more quickly. You can even leave the hospital sooner.
- Improve your results. People whose pain is well controlled seem to do better. They may avoid some problems (such as pneumonia and blood clots) that affect others.

COMMUNICATING PAIN RELIEF

You will be asked to rate your pain on a number scale from 0 to 10. Zero stands for no pain up the scale to 10 which represents the worst possible pain imaginable. Be honest when rating your pain. If the pain medication is not helping let the nurse and doctor know. Ask your nurse to give your medication before the pain gets worse or a pain level above “4.” If your pain gets ahead of the medication, you may not have the best level of relief.



You Can Find Comfort

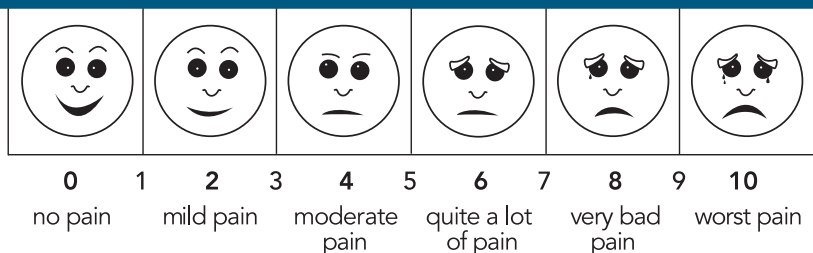


Both drug and non-drug treatments can be successful in helping to control your pain. You and your doctor will decide which ones are right for you. Many people combine two or more methods to get greater relief.



PAIN ASSESSMENT: Below is the pain scale being used at Southside Regional Medical Center.

What you feel is real and unique to you. Indicate your pain on a scale from 0 to 10



COMMONLY ADMINISTERED PAIN RELIEVERS

NSAIDs are non-steroidal anti-inflammatory drugs. You may already use low dose NSAIDs at home (Aspirin, Motrin, Advil). When given in prescription strength, medications of this type can relieve mild to moderate pain. They reduce swelling and soreness. NSAIDs may be used alone or with narcotics. Side effects are usually limited to stomach upset, but bleeding may occur with prolonged use.

OPIOID (Morphine and Codeine) are most often used for severe pain. It is rare for a patient to become addicted to opioids due to short-term use. They may cause dry mouth, drowsiness, nausea, constipation, itching, or interfere with breathing or urination. Let your nurse or doctor know if you begin having any side effects so that they can treat them as soon as possible.

REGIONAL (LOCAL) ANESTHETICS (Bupivacaine) are local anesthetics temporarily used to block the pain signal at the affected area. These drugs can be used in several ways. The first way is to inject the local medicine into this area to numb everything for the procedure/surgery. The second way the local medication can be used is to mix it with a narcotic and the combination of these two drugs are used for pain control. Local anesthetics are effective for severe pain.

METHODS USED TO GIVE PAIN RELIEF MEDICINES

- **Tablet or liquid:** Medicines that may be given by mouth include Aspirin, Motrin, or Codeine. Tablets and liquids cause less discomfort than "shots." They are inexpensive, simple to give, and easy to use at home. You cannot take pills if your doctor does not want you to eat or if you are nauseated or vomiting. There may be a delay in pain relief since you must ask the nurse to bring the medicine.

- **Injections into skin or muscle:** Injections ("Pain Shots") relieve pain throughout your body. Injections can be given even if you are nauseated or vomiting. The injection site is usually painful for a short time. Pain relief may be delayed while you ask the nurse for medicine and wait for the shot to be given.

- **Injections into vein:** Pain medicines are injected into a vein through a small tube called an intravenous (IV) catheter. The tip of the tube stays in the vein. Pain medicine that is given in the IV acts quickly.

Your doctor could order a Patient Controlled Analgesia (PCA) pump. The PCA pump allows for a more constant level of pain relief than can be achieved when patients must request medication. PCA pumps are designed so that you cannot overdose on the pain medicine.

When you have pain, instead of ringing for the nurse to receive pain medication, push the button which activates the machine. A dose of pain medication ordered by your doctor will go into your IV line. Give yourself only enough medicine to take care of your pain, but do not ask the machine for a dose if you start to feel sleepy. Try to balance pain relief against sleepiness. If your pain medicine seems to stop working despite pushing the button several times, call the nurse to check your IV. If there is still a problem,

the nurse will call your doctor. Only you or your nurse can activate the machine. If anyone other than you pushes the button, the PCA machine will be immediately discontinued.

- **Epidural:** Medicine is given through a small tube in your back. This small tube is called an epidural catheter. This catheter is inserted into your back by an anesthesiologist (a doctor who puts you to sleep). The pain medication can be given in two ways. The first way is the anesthesiologist will inject the pain medicine into your catheter every 18 to 24 hours. The side effects you could experience are itching, difficulty urinating, and it could slow down your breathing.

The second way pain medicine can be given into the catheter is with a PCA pump. The PCA pump is connected to your epidural catheter and the pain medication runs continuously. This method works well with abdominal pain (stomach area) or on the lower parts of your body such as procedures or surgeries involving the hip, knee, or foot. The side effect of PCA epidural is that you could experience numbness (which will be temporary) or tingling of your legs. If numbness and tingling should occur, notify the nurse immediately so that the anesthesiologist can make adjustments in the dosage.

Reducing Pain With Medication

In addition to pain relievers, you may receive other medications to help make you comfortable:

Tranquilizers

(Ativan and Valium) help reduce anxiety so that pain medicine can work better.

Sedatives

(Ambien and Restoril) help you feel relaxed or sleepy. These medicines also help the pain medicine work better.

Antiemetics

(Vistaril and Phenergan) reduce nausea and vomiting, possible side effects of some pain medications. They may cause drowsiness in some people.

FOR YOUR SAFETY: Let your doctors and nurses know if you are allergic to any medicine.

TECHNIQUES TO HELP REDUCE YOUR ANXIETY

RELAXATION: Relaxation techniques such as abdominal breathing and jaw relaxation can help to increase your comfort.

IMAGERY, DISTRACTION, AND MUSIC: These techniques can help relax you so that the pain medication has a better effect. These techniques can be taught to you before the procedure/surgery. If you wish to listen to music, bring your own personal CD/cassette player and CD's/tapes.

PHYSICAL AGENTS: Cold packs, massage, TENS (Transcutaneous Electrical Nerve Stimulation), and rest are also methods that your doctor could order to reduce the pain you experience.

RELAXATION EXERCISES

DEEP BREATH. TENSE. EXHALE. RELAX. YAWN FOR A QUICK RELAXATION

- 1) Clench your fist; breathe in deeply and hold it a moment.
- 2) Breathe out slowly and go limp as a rag doll.
- 3) Start yawning. Yawning becomes spontaneous. It is also contagious so others may begin yawning and relaxing too.

SLOW RHYTHMIC BREATHING FOR RELAXATION

- 1) Breathe in slowly and deeply.
- 2) As you breathe out slowly, feel yourself beginning to relax; feel the tension leaving your body.
- 3) Now breathe in and out slowly and regularly at whatever rate is comfortable for you. You may wish to try abdominal breathing. If you do not know how to do abdominal breathing, ask your nurse for help.
- 4) To help you focus on your breathing, breathe slowly and rhythmically: Breathe in as you say silently to yourself, "in, two, three." Breathe out as you say silently to yourself, "out, two, three," or each time you breathe out, say silently to yourself a word such as "peace" or "relax."
- 5) You may imagine that you are doing this in a place you have found very calming and relaxing for you, such as lying in the sun at the beach.
- 6) Do steps 1 through 4 only once or repeat steps 3 through 4 for up to 20 minutes.
- 7) End with a slow deep breath. As you breathe out, say to yourself, "I feel alert and relaxed."

JAW RELAXATION

- 1) Let your lower jaw drop slightly, as though you were starting a small yawn.
- 2) Keep your tongue still and resting on the bottom of your mouth.
- 3) Let your lips get soft.
- 4) Breathe slowly, evenly, and rhythmically: inhale, exhale, and rest.
- 5) Allow yourself to stop forming words with your lips and stop thinking in words.

PEACEFUL PAST

Something may have happened to you a while ago that brought you peace and comfort. You may be able to draw on that past experience to bring you peace or comfort now. Think about these questions:

- 1) Can you remember any situation, even when you were a child, when you felt calm, peaceful, secure, hopeful, and comfortable?
- 2) Have you ever daydreamed about something peaceful? What were you thinking of?
- 3) Do you get a dreamy feeling when you listen to music? Do you have any favorite music?
- 4) Do you have any favorite poetry that you find uplifting or reassuring?
- 5) Are you religiously active? Do you have favorite readings, hymns, or prayers? Even if you have not heard or thought of them for many years, childhood religious experiences may still be very soothing.

Additional Points: Very likely, some of the things you think of in answer to these questions can be recorded for you, such as your favorite music or a prayer. Then you can listen to the tape whenever you wish. On the other hand, if your memory is strong, you may simply close your eyes and recall the events or words.

Non-Drug Pain Relief Methods

These methods can be effective for mild to moderate pain and to increase the pain relief efforts of drugs. There are no side effects to these methods. These techniques are best learned before the procedure/surgery. It is helpful to learn about the procedure/operation and the pain expected afterwards. By being aware of what to expect, your fears will be decreased, which ultimately reduces the amount of pain you will experience.

RELAXATION EXERCISE TIPS

These relaxation exercises do take practice so you may want to practice at home before coming into the hospital. You need to be in a comfortable sitting or lying position before starting these exercises.

THINGS TO REMEMBER

YOU CAN GET BETTER PAIN CONTROL BY DOING THE FOLLOWING:

- Ask the doctors and nurses what to expect. Will there be much pain? Where will it occur? How many days is it likely to last?
- Discuss your past pain control experiences with your doctors and nurses that have either worked well or not so well for you.
- Discuss with your doctors and nurses any concerns you may have about pain medicine, including any allergies to medicines or prior substance abuse, and ask about side effects that may occur with treatments.
- Learn deep breathing and relaxation exercises.
- Use massage or hot or cold packs to help decrease the pain experience if ordered by your doctor. If you want to listen to music, bring your own walkman and tapes.
- Take the pain medicine that is ordered. You will not get addicted.
- Take pain medicine when pain first begins. The pain is better controlled if you do not wait to take pain medicine when it is worse.
- Take pain medicine before you do activity that you find makes the pain worse.
- Rate your pain by using the pain scale 0-10. Be honest: If the pain medication is not helping, let the doctors and nurses know. The dosage may need to be adjusted.
- Set a pain control rating scale such as having no pain that is worse than 3 or 4 on the pain scale.
- Stick with your pain control plan if it is working. Your doctors and nurses can change the pain treatment if your pain is not under control.
- You need to let the doctors and nurses know about your pain. The doctors and nurses want and need to know about your pain to help control it.

QUESTIONS AND CONCERNS FOR YOUR DOCTOR

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Reference: Post-Operative Patient Education Booklet
U.S. Department of Health and Human Services
Agency of Health Care Policy and Research, February 1994.

QUIET ZONES

IS IT TOO NOISY AT NIGHT?

Thank you for choosing Southside Regional Medical Center for your healthcare needs. Our goal is to provide excellent care and to make your stay as comfortable as possible.

We know that a quiet environment helps with the healing process and we will do everything we can to keep the noise level down. However, some noise is necessary to assure your safety, such as machine alarms. For example, if you have an intravenous line and an infusion pump is used, the alarm will alert the nurse to check it. Our goal is to provide excellent care and to make your stay as comfortable as possible and that is why we have Quiet Zones. Quiet Zones are specific areas in the hospital that need to remain quiet so our patients have a more pleasurable recovery.

If it becomes too noisy at night, please call extension 5000 from the phone in your room and let the operator know about the noise level and what unit you are on. A member of our staff will check the unit and alert the nursing staff.

Please ask your visitors to help with keeping the noise level down by not using loud voices. This will also assist with creating a quiet environment.

We are here to help you on your road to recovery. Please let us know if there is anything else we can do for you.



**What
is a
Quiet Zone?**

*Shhh,
you're in
our Quiet
Zone*



PREVENTING FALLS

IN THE HOSPITAL FOR PATIENTS + FAMILIES

A fall can happen anywhere. Falls can be very serious. You can help minimize the chance of falling while a patient in the hospital. There are certain patients who have a higher risk for falling. Factors that can contribute to the risk of falling are: confusion, weakness or decreased mobility, depression, a history of falls, bowel or bladder urgency and patients over 60 years old.



Falls Can Cause Serious Injuries

FOLLOW THESE SUGGESTIONS TO REDUCE YOUR RISK OF FALLING

FOOTWEAR

- Non-slip sole shoes or slippers are best. Wear them whenever you are out of bed.
- Make sure your shoes fit properly.
- Do NOT wear socks, stockings or knitted house shoes on bare floors. Bare floors can be very slippery.
- Hard-soled shoes, such as those with hard rubber soles, are much safer.

BED RAILS

- Bed rails can serve many purposes for you.
- Rails can prevent you from rolling off the bed.
- They can also remind you to stay in bed.
- Upper rails can be helpful for you to hold on to while sitting on the side of your bed and again as you stand up.
- Bed rails are also helpful for you to use as you turn in bed. You can hold the bed rails and turn from side to side.
- Do not lower any of the side rails until you have spoken with your nurse.
- You should use the side rails to get in and out of bed as the nurses have instructed.
- It is best to keep the bed in a low position for safety.

RESTRAINTS

- Sometimes if you are very confused and you are at risk for falling out of bed, your physician may order a roll belt or other device to prevent a fall.
- It is important the safety device not be removed without first checking with the nurse.
- If you have any concerns about safety devices, please talk with your nurse or physician.

IV TUBING

- If you have IV tubing, it is possible to become tangled in the tubing. Call for assistance prior to getting out of bed or ambulating.

CALL LIGHT

- The call light should always be within reach. If it is not, ask someone to place it within reach.
- You should always use the call light if you need help getting up or have been instructed to do so by your nurse or physician.
- Never hesitate to press the call light again if you need assistance.



PERSONAL ITEMS

- Keep needed items in reach such as: the telephone, water pitcher, tissues and eyeglasses, etc.
- Leaning over the side of the bed or reaching for needed items may cause a fall.

OTHER IMPORTANT INFORMATION

You may be taking medication that causes drowsiness. Call the nurse for assistance when getting out of bed if you feel drowsy, dizzy, or off balance.

Walk slowly and carefully when out of bed. Do not lean or support yourself on rolling objects such as I.V. poles or your bedside table.

Thinking ahead and providing a safe environment can prevent many falls.

SPIRITUAL CARE

HOLISTIC CARE AT SRMC

The goal of our Spiritual Care Service Department is to engage the spiritual dimension of individuals including their beliefs, faith, culture, values and religious practices. Healing, coping, well-being and growth of the individual are among our goals. Spiritual Care Services are available to patients, their families and our health care staff regardless of religious affiliation, and are available free of charge. If you would like a visit from one of the Chaplains, please just ask your nurse or physician, or dial extension 5593.

SPIRITUAL CARE SERVICES

Spirituality is an important part of the holistic care at Southside Regional Medical Center. Spirituality is not limited to beliefs or membership in a religious community. Rather, it deals with our human need for a sense of being valued and cared for. Everyone's religious and/or spiritual values are unique. Our Chaplains appreciate diversity, individual beliefs and differences. They strive to provide a non-judgemental, caring presence.

SPIRITUAL CARE SERVICES MAY INCLUDE ANY OF THE FOLLOWING... AND MORE:

- Sharing feelings, such as anger, hope, fear or sorrow.
- Talking about the meaning of life and/or the experience of dying.
- Praying, meditating or reading Scripture or other inspirational writings.
- Discussing religious beliefs and concerns.
- Reviewing one's life by sharing stories and speaking about relationships.
- Reflecting on one's relationship with God or belief in a higher power.
- Participating in a ritual or receiving the sacraments.
- Exploring one's feelings about pain and suffering.
- Seeking forgiveness or discussing reconciliation of relationships.
- Supporting difficult decisions.
- Encouragement, giving of thanks and celebrating.

ETHICAL DILEMMAS

An *ethical or moral dilemma* is a situation in which one's guiding moral principles cannot determine which course of action is right or good. In other words, you have a choice to make but you just don't know what the right choice is. If you feel you have an ethical dilemma as it pertains to patient welfare at SRMC, you may request an ethics consultation. The Director of Spiritual Services will review your request with you and arrange an ethics consultation. Select members of the Ethics Committee will explore the various perspectives of your dilemma and offer a justifiable option(s). The goal is a morally acceptable decision in the patient's best interest. To request a consultation, please call 804-765-5593.

PRIVACY

At Southside Regional Medical Center, your privacy is highly valued. A photo ID badge identifies the Spiritual Care Staff.



**Healing, coping,
well-being and
growth**

SPIRITUAL RESOURCES

*The following
resources may
be available
for patient use:*

- The Bible
- The Qua'ran
- The Book of Mormon
- The Bhagavad Gita

SRMC CHAPEL

*The Chapel, located
near the main entrance
in the lobby, is open
24 hours a day for
meditation, prayer and
reflection. A Chapel
service is held each
Tuesday at noon.*

BEREAVEMENT SUPPORT GROUP

GRIEF. *It presents itself in so many ways; anguish, heartache, sorrow, regret, loneliness. Learning to go and grow through grief is vital to a continued healthy lifestyle and making the commitment to move a step forward. However, recognizing its presence and impact can often times be the hardest thing to do. We know that sometimes an opportunity to vocalize your feelings and a concerned listener to hear them can be the beginning steps of healing. **We are here to help.***

First Step: The Support Group meets twice a month on the 2nd and 4th Thursdays at 7:00 p.m. Joining is free and easy. To learn more about our services or to join the SRMC Bereavement Support Group, please call 804-765-5593.

Location + Directions: Southside Rehabilitation Services Colonial Heights Medical Park, 430 Clairmont Court, Suite 120, Colonial Heights, VA.

Take the Temple Avenue exit (Exit #54) off of Interstate 95. Turn right onto Temple Avenue. Turn left at the traffic light onto Conduit Road. Turn left at the traffic light onto Ellerslie Road. Turn right onto Dunlop Farms Boulevard. Colonial Heights Medical Park is on the left.

We're Here To Help: The Bereavement Support Group at Southside Regional Medical Center is committed to helping people who have experienced loss, as well as their family members.

Support group leaders include the Chaplain and other healthcare professionals, who are trained to assist bereaved people in coping with the emotional distress brought on by loss.

These professionals help individuals as they search to understand their grief. With their experience and expertise, the professionals provide ways to ease the pain and promote the emotional and spiritual well-being of group participants.

We're Here To Talk: Discussing fears and concerns with the SRMC professionals and with other people who have had similar experiences can be reassuring and encouraging.

You can find strength from talking about uncertainty and anxiety often associated with grief. By sharing your experiences, you will learn how to deal with certain stages of the grieving process.

Various speakers address the group on requested topics, including anger, guilt, fear and moving beyond cope to hope.

We're Here To Listen: Our trained professionals and the other members of the group are eager to hear your story and to assist you in any way that will help you deal with your grief.

The extent of your participation is up to you. In the beginning, you may only want to come and listen, later joining the group discussion. Or you may want to jump right into the exchange of ideas and information.

However you choose to participate, the choice is yours. The important thing is that we are here to help you through this difficult time.

A Time and Season

“

God grant me the serenity
to accept the things I
cannot change, Courage
to change the things I can,
and the Wisdom to know
the difference.

”

*To everything there is a season, and a time for every
matter under heaven: a time to be born, and a time
to die; a time to plant, and a time to pluck up what is
planted; a time to kill, and a time to heal; a time to
break down, and a time to build up; a time to weep,
and a time to laugh; a time to mourn, and a time
to dance; a time to cast away stones, and a time to
gather stones together; a time to embrace, and a time
to refrain from embracing; a time to get, and a time to
lose; a time to keep, and a time to cast away; a time
to rend, and a time to sew; a time to keep silence, and
a time to speak; a time to love, and a time to hate; a
time of war, and a time of peace.*

“

*You may not know all the details
of your journey, or clearly see
where the trail is leading, but
God will always give you enough
light to take the next step.*

-Roy Lessin

”

IT'S TIME

TO STOP SMOKING

There is an abundance of evidence to prove that smoking cigarettes or using smokeless tobacco is a serious health hazard. It is also expensive, since a one-pack-per-day habit will cost you over \$1000 per year. Quitting may not be easy, but it can be done, as many ex-smokers have proven. You may be able to do it yourself or you may need some outside help. It isn't important how you do it. What is important is the fact that you are quitting.



SOME TIPS ON HOW TO QUIT

The Beginning: Probably the most important aspect to success is your readiness and determination to quit. Once you've made up your mind to stop, this hurdle is behind you. Then you can begin to investigate some of the methods of quitting and the variety of support available to you. At this point, it might be a good idea to start a smoking diary listing when you smoke during the day. This will help you analyze your smoking urges. Once you begin to understand when you smoke and what sort of feelings or emotions trigger your desire to light up, you're on the track toward controlling your habit. Keep your diary for several days before you stop smoking.

Where To Go: Sometimes you need to go no further than yourself. Some people, by exerting their willpower and keeping their thoughts and actions under strict control, can stop smoking with no outside help. But even these people should try and get a basic knowledge of why they smoke and how they became addicted. Many books have been written on the subject. Go to your public library and select the ones you think might be most helpful. Organizations dedicated to the health of heart and lungs usually have a lot of free literature designed to assist in quitting. Call the American Cancer Society, the American Lung Association, or the American Heart Association.

Other Aids: Support groups are available in communities all over the country. Inquire among the same groups listed above or consult the Yellow Pages in your phone book. Hospitals, clinics, universities and other medical research organizations often have stop-smoking programs. Any health professional should be able to guide you toward the sources you feel would be most valuable to you.

What They Do: Whether you decide to stop with the help of reading materials or whether you prefer the support of a group, you'll find the techniques are similar. All good programs encourage behavior modification—changing your way of life so that cigarettes are no longer important in certain situations. Once you have decided to quit, you will find lots of material available to help you attain your goal.

Smoking Causes Serious Health Hazards

SUCCESSFUL QUITTING TIPS

- ☐ Keeping a smoker's diary will help you understand your nicotine urges.
- ☐ Don't let your behavior modification techniques get rusty after you've stopped smoking.
- ☐ Follow a regular exercise program, drink a lot of water and eat a well-balanced diet.



SAFETY TIPS + INFORMATION LOG

While you are in the hospital, your doctor may order medicines for you. Some of the medicine may be a different color or even have a different name from what you normally take at home. This is because the hospital may use a different brand of the same medicine.

Your doctor may also change your medicines or prescribe a new one. It is OK to ask your nurse and doctor about the different medicines you are receiving. The times that you receive your medicines also may be different from the time of the day you take your medications at home. When you go home, you may use your normal routine again. For example, if your medicine is to be take 3 times a day, the hospital times are 9 a.m., 4 p.m. and 9 p.m. You may get your medicines one hour before or after that time.

When you go home, the doctor and nurse will discuss with you the medicines you are to take once you leave the hospital. It's OK to ask any questions you may have about the medicines that are being prescribed to you. We want you to understand what your medicines are, what they are for, how to take them and any side effects you may need to know.

Always remember to take your medicines once you go home. Even if you start to feel better, do not stop the medicines unless you talk to your doctor. Keep a record of all the medicines you are taking, including any vitamins, herbs or other supplements you take. There is a form in your packet that you can use.



Keeping a Record

IMPORTANT TIPS

- 1) **Any time you go to the doctor, take your medicines.** Also take any vitamins, herbs or supplements that you take.
- 2) **Keep a list of your medicines and allergies** in your wallet in case you are caught away from home.
- 3) If you do take regular medicines, and want to buy an over-the-counter medicine, **have your pharmacist check** to be sure the medicines are safe to be taken together.
- 4) If you change pharmacies, **always bring your list of medicines** to the new pharmacist.
- 5) **After starting any new medicine you may notice you feel different.** Check with your doctor or pharmacist to be sure that this is expected.
- 6) **If you run out of a regular medication, don't just stop and wait until your next appointment.** This could make your condition worse. Check with your doctor.
- 7) When placed on medications, **finish all of the prescription** unless your doctor tells you differently (especially if you are taking antibiotics).

Thank you for choosing Southside Regional Medical Center as your hospital. Your health is very important to us. Please let us know if there is anything we can do to make your stay with us as pleasant as possible.

**USE THE FORM ON
THE BACK to record
your medical history
and current medications.**

FILL IN YOUR PATIENT INFORMATION

NAME

HOME PHONE

NEAREST RELATIONSHIP

PHONE

YOUR DOCTOR(S) NAME(S)

PHONE

PAST/PRESENT MEDICAL PROBLEMS AND SURGERIES

ALLERGIES

NOTES

LIST YOUR CURRENT MEDICATIONS

MEDICINE NAME

DOSE

HOW OFTEN

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RIGHTS + RESPONSIBILITIES

OF SRMC PATIENTS

At Southside Regional Medical Center, we believe that patients who understand and participate in their treatment achieve better results. Therefore, we encourage you to be an active member of your healthcare team. As a patient, you have specific Rights and Responsibilities regarding your medical care. Please take a moment to familiarize yourself with this information.



**Staying
Involved**

YOU HAVE THE RIGHT TO:

- Know the risks, benefits and alternatives to proposed treatments or procedures.
- Information about the physicians or other clinicians who will be providing care or treatment.
- Receive information in easy to understand terms that will allow for an informed consent or refusal of the treatment or procedure.
- Privacy regarding medical care.
- Effective assessment and management of pain.
- Participate in the plan of care.
- Formulate advanced directives and have staff and practitioners comply with those directives.
- Reasonable responses to reasonable requests for service.
- Leave the medical center against the advice of the physician.
- Examine and receive an explanation of the bill for services regardless of the source of payment.
- Select providers of goods and services after discharge.
- Receive a Notice of Privacy Practices.
- Request privacy protection.
- Access protected health information.
- Amend protected health information.
- Request an accounting of disclosures of protected health information.
- Consent to receive the visitors who you designate, including but not limited to a spouse, a domestic partner (including a same sex domestic partner), another family member, or a friend. You may withdraw your consent to receive any visitor at any time. To the extent this hospital places limitations or restrictions on visitation, you have the right to set any preference of order or priority for your visitors to satisfy those limitations or restrictions. This hospital does not and will not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability. This hospital will ensure that the visitors chosen by you will be able to enjoy full and equal visitation privileges, consistent with your preferences.

YOU HAVE THE RESPONSIBILITY TO:

- Provide accurate and complete information concerning your present medical condition, past illnesses or hospitalizations and any other matters concerning your health.
- Tell your caregivers if you do not completely understand your plan of care.
- Follow the caregivers' instructions.
- Follow all medical center policies and procedures while being considerate of the rights of other patients, medical center employees and medical center property.

IF YOU HAVE A COMPLAINT OR SAFETY CONCERN, PLEASE SHARE IT WITH US.

For care or safety issues ask to speak with the director or nurse manager of your unit or facility. You may also contact our Director of Patient Relations, Administration, at 804.765.5066. Other resources available to you or your representative include the Virginia Dept. of Health Professions (1.800.533.1560), The Office of Licensure and Certification (1.800.955.1819), and The Joint Commission (1.800.994.6610).

YOUR RIGHT TO DECIDE

In 1990, Congress passed the Patient Self-Determination Act. It requires health care institutions to tell patients about their rights under Virginia law to make decisions about their medical care. These rights include the right to accept or refuse care and the right to make advance directives about their care.

• Q: WHAT ARE MY HEALTH CARE RIGHTS?

• A: Under Virginia law, "[e]very human being of adult years and sound mind has a right to determine what shall be done with his own body." Doctors help their patients to exercise this right when they give information about medical treatment they are recommending. When you then agree to the recommended treatment, you have given your informed consent. You also have the right to refuse the recommended treatment.

• Q: WHAT HAPPENS IF I CANNOT GIVE MY CONSENT?

• A: Many people worry about what would happen if, due to mental, physical or emotional problems, they are unable to tell their doctors whether they want or don't want recommended medical treatment. Under a Virginia law called the Health Care Decisions Act, if you are an adult you may sign a document that makes your choices about treatment known to your doctor and family in advance. In that document, you also can name someone you trust to make these decisions for you if you become unable to express your wishes yourself. This document is known as an "advance directive."

This document describes advance directives and answers several questions. It is not intended as legal advice. If you have other questions about advance directives, you may want to discuss them with your doctor, or lawyer, or family.

• Q: HOW DO I MAKE MY CHOICES ABOUT LIFE-PROLONGING TREATMENT KNOWN?

• A: The Virginia Health Care Decisions Act allows you to make two types of decisions about your health care in an advance directive. The first type of decision you can make tells people how to care for you if you have a terminal condition and you are unable to make decisions for yourself. This document is often called a "living will." A terminal condition is an incurable condition in which death is imminent. It also means a persistent vegetative state, which some people call a permanent coma, even when death is not imminent. In either case, a doctor has determined that there is no medically reasonable hope for recovery.

Signing this type of advance directive permits you to decide in advance whether you want doctors to give you what the law calls "life-prolonging procedures."

• Q: WHAT ARE LIFE-PROLONGING PROCEDURES?

• A: These are treatments that aren't expected to cure a terminal condition or make you better but only prolong dying. They include hydration (giving water) and nutrition (giving food) by tube, machines that breathe for you, and other kinds of medical and surgical treatment. Life-prolonging procedures do not include treatments needed to make you comfortable or to ease pain. Your doctor will give you treatment or drugs to ease pain and make you comfortable unless you say in your advance directive that you do not want them. You can also say in this type of advance directive that you want to have particular life-prolonging procedures given to you. For example, if you want to have all life-prolonging procedures except tube feeding withdrawn, you may say that in your advance directive.

• Q: WILL AN ADVANCE DIRECTIVE HELP ME IF I DO NOT HAVE A TERMINAL CONDITION?

• A: Yes. The Health Care Decisions Act permits you to make a second kind of decision in an advance directive. You may name someone to make treatment decisions - to accept or refuse medical care - for you if at some point you cannot make them yourself. This type of advance directive is often called a "medical power of attorney," or "durable power of attorney for health care", or a "health care proxy." The person named in this type of advance directive can make all health care decisions for you that you could have made for yourself if you were able, whether or not you are terminally ill. Or you may direct instead that he or she make only those decisions you list. The law says that the person you choose cannot make decisions that he or she knows go against your religious beliefs, basic values and stated preferences. You also may name a



Voicing Your Health Care Choices

person who will see that your organs or your body are donated, as you wish, after your death.

• Q: HOW DO THESE TWO TYPES OF ADVANCE DIRECTIVES DIFFER?

• A: A living will is only followed when you have a terminal condition and only deals with life-prolonging procedures. A durable power of attorney for health care covers those cases and also covers situations where you can't make treatment decisions for yourself but do not have a terminal condition, such as when you have an accident or take a drug that leaves you unconscious. It also covers more than decisions about life-prolonging procedures. It will cover any decisions you want it to cover. If you wish, the person to whom you give a durable power of attorney for health care could make any decisions about your health care that you could have made yourself.

• Q: WILL MY ADVANCE DIRECTIVE BE FOLLOWED IN AN EMERGENCY IF I CANNOT MAKE MY WISHES KNOWN?

• A: Usually emergency medical personnel, such as rescue squads or ambulance teams, cannot follow your wishes in an advance directive if they are called to help you in an emergency. Also, hospital emergency room providers may not know your wishes in an emergency. But if you have a terminal or serious condition, under certain circumstances you can make decisions in advance about refusing one type of emergency medical care - resuscitation if your heart stops beating or you stop breathing. You do this by having your doctor complete a "Do Not Resuscitate Order" (often called a "DNR order") for you on a form approved by the state. Your doctor also may write a DNR order to be followed in a hospital or nursing home. This order is valid unless you revoke it - that is, you change your mind and tell your doctor that you do want to be resuscitated.

• Q: IF I DIE BECAUSE I REFUSED LIFE-PROLONGING TREATMENT UNDER THE HEALTH CARE DECISIONS ACT, WILL MY DEATH BE CONSIDERED SUICIDE?

• A: No. The Health Care Decisions Act specifically says that, if it is followed and the patient dies, the death is not suicide. Following the Act will not void a life insurance policy even if the policy says otherwise.

• Q: MUST AN ADVANCE DIRECTIVE BE IN WRITING?

• A: No. The Health Care Decisions Act allows people who have a terminal condition and who never sign an advance directive to make an oral advance directive. They may say what they want, or name a person to make decisions for them, in front of witnesses.

• Q: MUST I HAVE AN ADVANCE DIRECTIVE?

• A: No. An advance directive is just one way of being sure your doctors and your loved ones know what health care you want when you can't tell them yourself. You may have only one or both of the two types of advance directives. The law requires that health care providers

not discriminate against people based on whether they have or do not have an advance directive.

• Q: WHAT HAPPENS IF I CAN'T MAKE DECISIONS AND I HAVE NO ADVANCE DIRECTIVE?

• A: Virginia law allows persons such as guardians or family members who may make decisions about your medical care even if you have no advance directive. If no listed person is available to decide for you, a judge can decide what treatment is best.

• Q: DO I NEED A LAWYER TO HELP ME MAKE AN ADVANCE DIRECTIVE?

• A: A lawyer is helpful, but you don't have to have a lawyer prepare either type of advance directive.

• Q: WHAT IF I CHANGE MY MIND AFTER I SIGN AN ADVANCE DIRECTIVE?

• A: You can revoke it. If you want to, you can make a new one. If you are a patient or resident in a health care facility, tell your doctor or nurse that you want to revoke or change your advance directive. It is best to destroy all copies of the old one.

• Q: HOW WILL MY DOCTOR KNOW I HAVE AN ADVANCE DIRECTIVE?

• A: Hospitals and other health care facilities must ask patients or residents if they have an advance directive and, if so, must see that a patient's medical record shows that they have one. In any case, you should give copies of your advance directive to your family and to your doctor, and to anyone else you think needs to know what medical treatment you do or do not want.

• Q: WHERE CAN I GO FOR MORE INFORMATION ABOUT ADVANCE DIRECTIVES?

• A: There are many sources of additional information on advance directives, including your local hospital. You also may wish to talk this over with your physician and lawyer.

The Virginia Department of Health and the Virginia Department for the Aging have approved this document for distribution under the requirements of federal law. Revised 7/98

CLINICAL LABORATORY IMPROVEMENT AMENDMENTS (CLIA)

DO YOU HAVE A CONCERN ABOUT A LABORATORY'S OPERATION?

What is a complaint?

A complaint is any concern that you may have about a laboratory's operation. Examples include the following: quality of testing; unlabeled specimens; unethical practices - e.g., record falsification, proficiency testing cheating; confidentiality of patient information; and laboratory personnel qualification or responsibility issues. This is not a comprehensive list and only includes examples of some of the most common types of complaints.

Who can report a complaint?

Anyone can report a complaint. Your complaint is important. Complaints can be reported by, but not limited to, patients, patients' relatives, the public, physicians and any personnel working in a laboratory.

What information should I provide when reporting a complaint?

Please provide as much of the following information as possible when reporting a complaint:

- name and address of the laboratory
- who has been involved or affected
- a complete description of your concern
- date(s) and time(s) of the incident(s)
- your view of the frequency and pervasiveness of the issue
- names of any other agency you have contacted
- your name, address, and telephone number (optional)
- any other details or documentation that will verify the problem

Am I required to provide my contact information?

You may choose not to provide your name and/or contact information. However, the investigating entity will not be able to contact you to gather any further necessary information or to inform you of the outcome of the investigation.

Will I remain anonymous if I provide my contact information?

If you provide your name and contact information, the investigating entity will make every attempt to maintain your anonymity as permitted by Federal or State laws.

You can be assured of the privacy and anonymity of your complaint. A complainant's identity is disclosed only to those individuals who are acting in an official capacity to investigate the complaint.



Laboratory Complaints

Who do I contact for reporting a complaint?

You may contact the Centers for Medicare & Medicaid Services (CMS) Central Office, Division of Laboratory Services (CLIA), in Baltimore, Maryland at 410.786.3531 locally or at 1.877.267.2323 (toll free) extension 63531.

What happens after I report a complaint?

Every complaint is investigated and documented. If you have provided contact information, you will receive a written acknowledgement that the complaint is being investigated. Once the investigation is complete, you will be notified of the outcome. Complaints that are not related to CLIA regulatory compliance will be referred to the appropriate entity, whenever possible.

Are there additional contacts for reporting a complaint?

You may also call, write or e-mail your complaint to any of the following:

- directly to the laboratory management
- CMS Regional Office
- the State Agency (SA) or State Department of Health where the laboratory is located
- the laboratory's accreditation organization, if applicable or known, or
- the laboratory's exempt State office or State licensure program, if applicable or known

Where do I find contact information for the following?

CMS Regional Offices CLIA Contact List
<http://www.cms.hhs.gov/CLIA/downloads/CLIA.RO.pdf>



State Survey Agencies CLIA Contact List
<http://www.cms.hhs.gov/CLIA/downloads/CLIA.SA.pdf>

There may also be a section in your phone book that lists State offices, as most States have a 1.800 line for complaint submission.

List of Approved Accreditation Organizations Under CLIA
<http://www.cms.hhs.gov/CLIA/downloads/AO.List.pdf>

List of Exempt States Under CLIA
<http://www.cms.hhs.gov/CLIA/downloads/Exempt.States.List.pdf>. You may also visit your local library to obtain Internet access.

Where can I find additional information about CLIA?

For more information and resources regarding the CLIA program, please visit the CMS/CLIA website at: www.cms.hhs.gov/clia

NOTE: Congress passed the Clinical Laboratory Improvement Amendments (CLIA) in 1988 establishing quality standards for all laboratory testing to ensure the accuracy, reliability and timeliness of patient test results regardless of where the test was performed. The final CLIA regulations were published in the Federal Register on February 28, 1992. The requirements are based on the complexity of the test and not the type of laboratory where the testing is performed. On January 24, 2003, the Centers for Disease Control and Prevention (CDC) and the Centers for Medicare & Medicaid Services (CMS) published final CLIA Quality Systems laboratory regulations that became effective April, 24, 2003.

August 2009

SPEAK UP!

HELP PREVENT ERRORS IN YOUR CARE

Everyone has a role in making health care safe – physicians, health care executives, nurses and technicians. Health care organizations across the country are working to make health care safety a priority. You, as the patient, can also play a vital role in making your care safe by becoming an active, involved and informed member of your health care team. An Institute of Medicine (IOM) report has identified the occurrence of medical errors as a serious problem in the health care system. The IOM recommends, among other things, that a concerted effort be made to improve the public's awareness of the problem. The "Speak Up" program, sponsored by The Joint Commission, urges patients to get involved in their care. Such efforts to increase consumer awareness and involvement are supported by the Centers for Medicare and Medicaid Services. This initiative provides simple advice on how you, as the patient, can make your care a positive experience. After all, research shows that patients who take part in decisions about their health care are more likely to have better outcomes.



Maintaining Awareness

SPEAK UP IF YOU HAVE QUESTIONS OR CONCERNS, AND IF YOU DON'T UNDERSTAND, ASK AGAIN. IT'S YOUR BODY, AND YOU HAVE A RIGHT TO KNOW.

- Your health is too important to worry about being embarrassed if you don't understand something that your doctor, nurse or other health care professional tells you.
- Don't be afraid to ask about safety. If you're having surgery, for example, ask the doctor to mark the area that is to be operated upon, so that there's no confusion in the operating room.
- Don't be afraid to tell the nurse or the doctor if you think you are about to receive the wrong medication.
- Don't hesitate to tell the health care professional if you think he or she has confused you with another patient.

PAY ATTENTION TO THE CARE YOU ARE RECEIVING. MAKE SURE YOU ARE GETTING THE RIGHT TREATMENTS AND MEDICATIONS BY THE RIGHT HEALTH CARE PROFESSIONALS. DO NOT ASSUME ANYTHING.

- Tell a nurse or doctor if something doesn't seem quite right.
- Expect health care workers to introduce themselves when they enter your room and look for their identification badges. A new mother, for example, should know the person to whom she is handing her baby. If you are unsure, ask.
- Notice whether your caregivers have washed their hands. Hand washing is the most important way to

prevent the spread of infections. Don't be afraid to gently remind a doctor or nurse to do this.

- Know what time of day you normally receive a medication. If it doesn't happen, bring this to the attention of your nurse or doctor.
- Make sure your nurse or doctor confirms your identity, that is, checks your wristband or asks your name, before he or she administers any medication or treatment.

EDUCATE YOURSELF ABOUT YOUR DIAGNOSIS, THE MEDICAL TESTS YOU ARE UNDERGOING, AND YOUR TREATMENT PLAN.

- Ask your doctor about the specialized training and experience that qualifies him or her to treat your illness (and be sure to ask the same questions of those physicians to whom he or she refers you).
- Gather information about your condition. Good sources include your doctor, your library, respected websites and support groups.
- Write down important facts your doctor tells you, so that you can look for additional information later. And ask your doctor if he or she has any written information you can keep.
- Thoroughly read all medical forms and make sure you understand them before you sign anything. If you don't understand, ask your doctor or nurse to explain them.
- Make sure you are familiar with the operation of any equipment that is being used in your care. If you will be using oxygen at home, do not smoke or allow anyone to smoke near you while oxygen is in use.

ASK A TRUSTED FAMILY MEMBER OR FRIEND TO BE YOUR ADVOCATE.

- Your advocate can ask questions that you may not think of while you are under stress.
- Ask this person to stay with you, even overnight, when you are hospitalized. You will be able to rest more comfortably and your advocate can help to make sure you get the right medications and treatments.
- Your advocate can also help remember answers to questions you have asked, and speak up for you if you cannot.
- Make sure this person understands your preferences for care and your wishes concerning resuscitation and life support.
- Review consents for treatment with your advocate before you sign them and make sure you both understand exactly what you are agreeing to.
- Make sure your advocate understands the type of care you will need when you get home. Your advocate should know what to look for if your condition is getting worse and whom to call for help.

KNOW WHAT MEDICATIONS YOU TAKE AND WHY YOU TAKE THEM. MEDICATION ERRORS ARE THE MOST COMMON HEALTH CARE MISTAKES.

- Ask about the purpose of the medication and ask for written information about it, including its brand and generic names. Also inquire about the side effects of the medication.
- If you do not recognize a medication, verify that it is for you. Ask about oral medications before swallowing, and read the contents of bags of intravenous (IV) fluids. If you're not well enough to do this, ask your advocate to do this.
- If you are given an IV, ask the nurse how long it should take for the liquid to "run out." Tell the nurse if it doesn't seem to be dripping properly (that it is too fast or too slow).
- Whenever you are going to receive a new medication, tell your doctors and nurses about allergies you have, or negative reactions you have had to medications in the past.
- If you are taking multiple medications, ask your doctor or pharmacist if it is safe to take those medications together. This holds true for vitamins, herbal supplements and over-the-counter drugs, too.
- Make sure you can read the handwriting on any prescriptions written by your doctor. If you can't read it, the pharmacist may not be able to either.

USE A HOSPITAL, CLINIC, SURGERY CENTER, OR OTHER TYPE OF HEALTH CARE ORGANIZATION THAT HAS UNDERGONE A RIGOROUS ON-SITE EVALUATION AGAINST ESTABLISHED, STATE-OF-THE-ART QUALITY AND SAFETY STANDARDS, SUCH AS THAT PROVIDED BY JCAHO.

- Ask about the health care organization's experience in treating your type of illness. How frequently do they perform the procedure you need and what specialized care do they provide in helping patients get well?
- If you have more than one hospital or other facility to choose from, ask your doctor which one offers the best care for your condition.
- Before you leave the hospital or other facility, ask about follow-up care and make sure that you understand all of the instructions.
- Go to Quality Check at www.jcaho.org to find out whether your hospital or other health care organization is accredited.

PARTICIPATE IN ALL DECISIONS ABOUT YOUR TREATMENT. YOU ARE THE CENTER OF THE HEALTH CARE TEAM.

- You and your doctor should agree on exactly what will be done during each step of your care.
- Know who will be taking care of you, how long the treatment will last, and how you should feel.
- Understand that more tests or medications may not always be better. Ask your doctor what a new test or medication is likely to achieve.
- Keep copies of your medical records from previous hospitalizations and share them with your health care team. This will give them a more complete picture of your health history.
- Don't be afraid to seek a second opinion. If you are unsure about the nature of your illness and the best treatment, consult with one or two additional specialists. The more information you have about the options available to you, the more confident you will be in the decisions made.
- Ask to speak with others who have undergone the procedure you are considering. These individuals can help you prepare for the days and weeks ahead. They also can tell you what to expect and what worked best for them as they recovered.

BILLING QUESTIONS?

Knowing how bills are processed can take the headache and worry out of receiving medical care. If you have any questions not answered here, please contact us.



How are my bills processed?

• Q: HOW DO YOU PROCESS MY BILL?

• A: Our goal at Southside Regional Medical Center (SRMC) is to ensure that your hospital bill is processed correctly and in a timely manner. Our Business Office works with other hospital departments to gather information needed to process your claim. This brochure is designed to provide your current information regarding insurance coverage, our billing practices and policies. Co-pays and Deductibles are due at the time of service and you will be asked by our registration staff for these amounts at that time. If you do not have insurance coverage an estimated bill will be provided and payment will be requested. In the event you are unable to pay the full amount, we will refer you to our Financial Counselor who will be happy to assist you and answer any questions you have regarding your bill. We are happy to work with our patients and may request additional financial information from you to determine an appropriate payment plan.

• Q: I HAVE MEDICARE. HOW DO YOU BILL MEDICARE AND ME?

• A: If you are covered by Medicare, Southside Regional Medical Center will bill Medicare after you are discharged. You are responsible for paying your Medicare deductible at the time of service. Medicare will send you a summary when they pay the hospital. This summary will show how much Medicare has paid SRMC. When SRMC has posted the Medicare payment, the hospital will send you a bill for any amount that remains due.

• Q: I HAVE MEDICARE AND COMMERCIAL INSURANCE. HOW DOES THIS GET BILLED?

• A: If you have commercial insurance secondary to Medicare, Southside Regional Medical Center will

bill Medicare following your discharge. Once Medicare has approved your claim for payment they will send you a summary showing the amount they have paid to the hospital. When SRMC posts the Medicare payment, the hospital will bill your secondary insurance company. You will receive a letter informing you that your secondary insurance has been billed. When your secondary insurance has paid and SRMC posts the payment to your account, a statement will be mailed to you for any remaining balance.

• Q: I HAVE MEDICARE AND MEDICAID. HOW ARE MY BILLS PROCESSED?

• A: If Medicaid is secondary to Medicare, Southside Regional Medical Center will bill Medicare following your discharge. Medicare will send you a summary when they pay SRMC. The summary will show how much Medicare has paid the hospital. When SRMC posts the Medicare payment we will bill Medicaid for the balance due. Depending on the services you receive, you could be required to pay a deductible and a co-pay if it was not previously paid at the time of service.

PLEASE CONTACT US DIRECTLY WITH YOUR
QUESTIONS AND/OR CONCERNS AT THE
NUMBERS LISTED BELOW:

General Business Office: 888.877.5298

Financial Counselor: 804.765.5557

*To Set Up Payment Arrangements:
888.877.5298*

• Q: WHAT ABOUT MEDICARE AND SERVICES THAT DON'T MEET MEDICAL NECESSITY? HOW ARE MY BILLS PROCESSED?

• A: Medicare will only pay for services that it determines to be medically necessary. If Medicare determines that a particular service is not medically necessary under the Medicare program standards, Medicare will deny payment for that service. At the time the service is to be rendered, you will be asked to sign an Advance

Beneficiary Notice (ABN), which identifies the services that may not be covered and for which you may be personally and fully responsible for payment.

• **Q: I HAVE COMMERCIAL INSURANCE. HOW ARE MY BILLS PROCESSED?**

• A: If you are covered by commercial insurance, Southside Regional Medical Center will bill your commercial insurance following your discharge. You will be sent a letter stating that SRMC has billed your insurance company. Co-pays and deductibles are due at the time of service. Your commercial insurance will send you an Explanation of Benefits summarizing their payment. After posting the commercial insurance payment, the hospital will send your claim to your secondary insurance company (when applicable) or will send you a bill for any remaining balance. Payment is due upon receipt of your statement after your commercial insurance payment is posted.

• **Q: HOW WILL YOU BILL ME IF I DON'T HAVE INSURANCE?**

• A: If you are not covered by commercial insurance, Medicare or Medicaid, an initial statement will be sent to you several days after you are discharged. We make every effort possible to ensure you are taken care of including assisting you with making arrangements to pay your bill, if needed. Your payment or payment arrangements to pay your bill, if needed. Your payment or payment arrangements should be made prior to or at the time of service and our Financial Counselors will be happy to help you with any questions you have during this process. Our Financial Counselors will work with you to help you apply for special programs such as Medicaid and assist you in completing a Financial Assistance Application if needed. If you are unable to pay your bill or make arrangements at the time of service, you should call our Financial Counselor at 804.765.5557 immediately after discharge so we may assist you.

• **Q: WHAT ABOUT OTHER BILLS I MAY RECEIVE?**

• A: Depending on the services you received, you may receive several different bills. SRMC will send you a bill for hospital services. If you had certain tests or procedures you also may receive a separate bill for professional interpretation by a radiologist, pathologist, or cardiologist. You may also receive a separate bill for anesthesia services or from other medical professionals. If you have visited our Emergency Department, a separate bill for the physician's fees will be sent to you. If you have any questions about other bills, please call our general business office at 804.765.5700 and one of our representatives will be glad to assist you.

• **HEALTHCARE FISCAL MANAGEMENT, INC.**

• Healthcare Fiscal Management, Inc. serves many large healthcare organizations and physicians groups. Inpatient and outpatient financial representatives work closely with patients to resolve account balances. Healthcare Fiscal Management, Inc. representatives help patients explore all avenues of account resolution including: additional insurance coverage options, state and county programs, credit and payment settlement plans, charity resources, and other financial assistance programs.

ACCREDITATIONS

Southside Regional Medical Center is a member of the Community Health Systems network of hospitals.

ACCREDITATIONS

- The Joint Commission
- The School of Nursing is accredited by the National League for Nursing and approved by the Virginia Board of Nursing
- The School of Radiation Sciences is accredited by the Joint Review Committee on Education in Radiologic Technology, recognized by the U.S. Department of Education

LICENSURE

- Commonwealth of Virginia Department of Health

MEMBERSHIPS

- American Hospital Association
- The Virginia Health Care Organization
- The Virginia Hospital & Healthcare Association
- American Trauma Society

RESOLVING CONCERNS AND COMPLAINTS

Coming to the medical center for almost any reason can be a time of stress and uncertainty. If you or your family have a concern or a complaint about our care or service, please share it with us. It is important that we address and try to resolve your issues as quickly as possible.

First, start with a healthcare professional who is directly involved in your care. Perhaps your nurse or other healthcare provider can take care of your concern. If not, you may ask to speak with the nurse manager of your unit (if you are an inpatient) or the director of the department (if you are an outpatient). Southside Regional Medical Center is committed to acknowledging your concern and working towards an understanding, solution or resolution. If you feel the matter has not been addressed to your satisfaction, it is within your rights to ask to speak with the nursing supervisor if you are an inpatient or the vice president of your outpatient service.

You may also call the Director of Patient Relations at 765.5066 if you need further assistance. Instead of calling, you may wish to write a letter or send an email. Please address your letter to either the CEO of Southside Regional Medical Center or the Director of Patient Relations at Southside Regional Medical Center, 200 Medical Park Boulevard, Petersburg, VA 23805, or you may email us at SRMC_Contactus@chs.net. We will respond promptly.

THE FOLLOWING RESOURCES ARE ALSO AVAILABLE TO YOU:

- The Center for Quality HealthCare Services and Consumer Protection
3600 Centre, Suite 216,
3600 West Broad Street
Richmond, VA 23230
1.800.955.1819
(for violations involving a medical center)
- Virginia Department of Health Professions
6603 West Broad Street, 5th Floor
Richmond, VA 23230
1.800.533.1560
(for violations involving an individual healthcare provider)



Trusting
Patient
Care

OUR MEDICAL STAFF

**Nearly 300 physicians
representing the
following specialties:**

Anesthesiology
Cardiac Surgery
Cardiology
Dental
Emergency Medicine
Family Practice
Gastroenterology
General Practice
General Surgery
Hematology
Internal Medicine
Neonatology
Nephrology
Neurology
Obstetrics & Gynecology
Occupational Medicine
Oncology
Ophthalmology
Oral Surgery
Orthopaedic Surgery
Otorhinolaryngology
Pain Management
Pathology
Pediatrics
Plastic Surgery
Podiatry
Psychiatry
Pulmonary Medicine
Radiology
Rehabilitation Medicine
Rheumatology
Urology
Wound Care

IF YOU HAVE A CONCERN

PLEASE TELL US



**Staying
Involved**

If you have a concern or suggestion on how we might improve our services, we want to know. Ask to speak with your Nurse Manager or the Department Director. If it is "after hours" or on the weekend, you may call the Operator (dial "0" from any in-house phone) and ask for the Nursing Supervisor to be paged. During normal business hours (Monday through Friday, 8:30 a.m. to 4:30 p.m.), you or your representative may direct your concern or suggestion to the Director of Patient Relations in Administration, by calling 804.765.5066. If you prefer, you may send your written concern to:

Ava Warren
Director of Patient Relations
Southside Regional Medical Center
200 Medical Park Boulevard
Petersburg, VA 23805

or send an email message to ava_warren@chs.net.

Every effort will be made to address your concern(s) immediately and to your satisfaction.

If an issue cannot be resolved quickly, we will maintain contact with you or your representative while we investigate. Improvement opportunities that are identified from information gained from complaints and grievances are reported to the Complaints and Grievance Committee and the Process Improvement Committee for review and action. Other resources to which you could direct your concern include the Virginia Department of Health Professions (800.533.1560), the Virginia Office of Licensure and Certification (800.955.1819) and the Virginia Health Quality Commission (804.289.5320).

Your patient rights include the right to lodge concerns, voice complaints or recommend changes freely without being subject to coercion, discrimination, reprisal or unreasonable interruption of care. Concerns, complaints and suggestions are confidential and are never recorded in medical records. We appreciate your taking the time to share your concerns and your suggestions.