

Preparing for Surgery

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Welcome

To our valued surgery patients,

This letter will provide you with valuable information about what to expect on the day of your surgery. Please review all the information in your surgical services packet and contact us if you have any questions. This information is also available online at bch.org/presurgery.

The surgery time given to you by your doctor's office may not have included the time needed to prepare you for your surgery. As a result, your arrival time may have been adjusted by the Pre-Anesthesia Testing (PAT) nurse during your pre-admission phone call. Please note that emergency surgeries can impact our daily schedule. Should your surgery be delayed, a member of the surgical team or your physician's office will keep you informed. We have updated our visitation policy due to respiratory virus season. There are no restrictions for visitors of surgery patients, however, visitors under the age of 12 are not allowed in either pre- or post-surgery areas unless it is in the best interest of the patient.

When you arrive at Foothills Hospital (4747 Arapahoe Avenue), parking is available in the parking structure or in the surface parking lot. Next, please proceed to the pre-operative suite on the second floor where a nurse will prepare you for your surgery. Your surgeon and anesthesiologist will meet with you prior to your surgery to address questions.

When it is time for your surgery, an operating room nurse will escort you to the room. Your visitor will be escorted to the surgery waiting area. After your surgery, you will spend approximately one hour in our Post-Anesthesia Care Unit (PACU). Your surgeon or a member of his/her team will provide an update to your visitor in the waiting area or by phone once you are in the PACU. If you need to stay in PACU more than one hour, we will keep your family informed.

We are committed to the privacy of all our patients. Therefore, only under rare circumstances will your visitor be able to see you in the PACU. If you are going home the same day, you will be transferred to our Pre/Post Unit after leaving the PACU. If you will be staying in the hospital overnight, you will be transferred to your hospital room. In either case, one adult visitor will be able to join you.

We hope this review provides information to make your time at Boulder Community Health a comfortable and caring experience.

Thank you,

Boulder Community Health Surgery Department

Preparing for Surgery

Welcome to Boulder Community Health! Thank you for choosing us for your surgical needs. This guide will give you information and instructions to prepare for your surgery.

Patient Instructions

Pre-Registration

Before your surgery, you can update personal, medical and insurance information through the MyBCH portal. Instructions on how to access this portal can be found at www.bch.org/mybch.

The pre-registration department will also confirm this information is complete and will call you if more information is needed.

Pre-Anesthesia Testing (PAT) phone call

Before your surgery you will get a phone call from Pre-Anesthesia Testing (PAT). If you do not receive this call 72 hours before your surgery, please call: 303-415-8128.

This phone interview will take between 20 and 30 minutes. The PAT nurse will review your health information and the medications you take. Please have your list of medications ready for your interview.

A hospital pharmacist may contact you by phone before your surgery to talk about your medication list.

Tests

You will be instructed if any tests are needed.

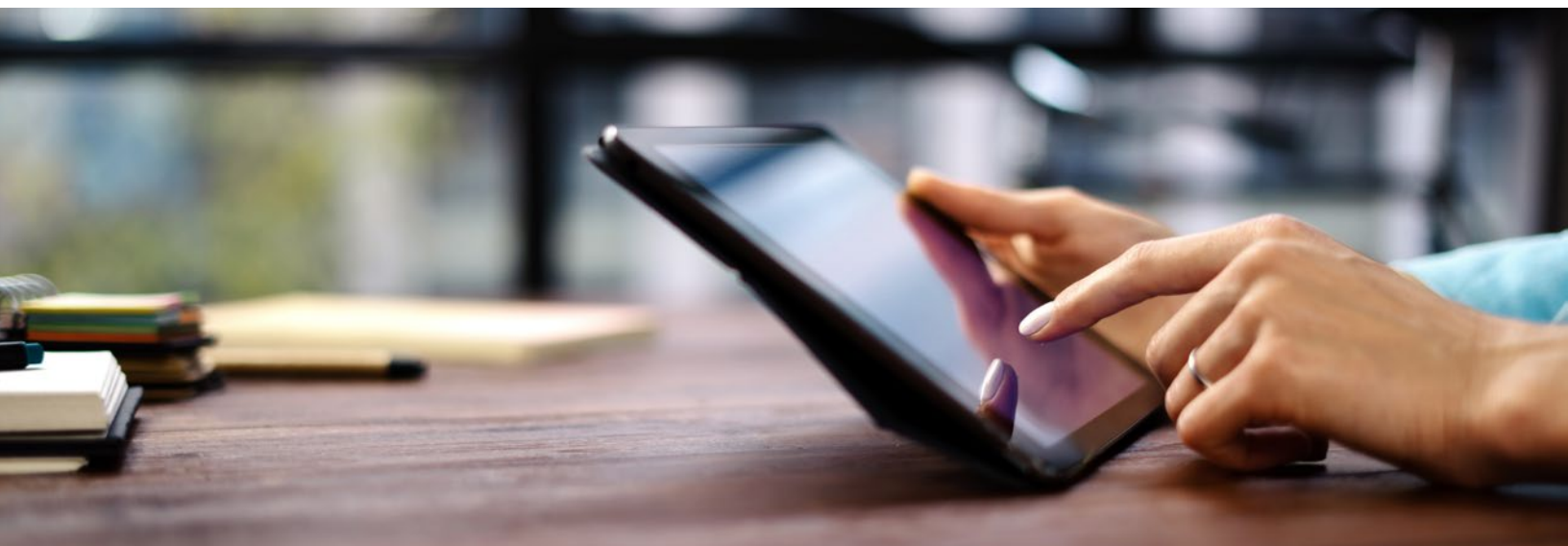
Medications

Be sure to let your surgeon and your nurse know if you are taking any blood thinners or anti-inflammatory drugs like aspirin, ibuprofen, Relafen, Celebrex, Coumadin, heparin, etc. If you are not sure about the types of medications you are on, please be sure to ask.

Important notes

- If you get a cold, sore throat, or fever before your surgery, let your surgeon's office know as soon as possible.
- You must have someone accompany you home after your surgery.
- For your safety, you should have someone stay with you for the first 24 hours after surgery.

For more information, please talk to your provider or nurse.



Eating and Drinking Before Surgery

Patient Instructions

You will be asked to not eat or drink before your surgery.

Why is this important?

- You will be receiving medications (called anesthesia) for your surgery.
- If you have food or liquid in your stomach when you receive anesthesia, some of it could get into your lungs. This is called “aspiration”.
- Although aspiration is rare, if it happens it can cause an infection, lung damage or breathing problems.

Food

You may have anything you like up until *nine* hours before your scheduled surgery time.

If you received specific instructions for bowel prep, please follow them.

Drink

You may have clear liquids until *three hours* before your surgery time.

This should contain sugar and electrolytes. We recommend that you drink at least eight ounces three to four hours before your surgery.

Anything containing solids like fats or proteins could cause a delay in your surgery.

Examples of non-clear liquids to avoid:

- Any dairy or nondairy creamer
- Beef and chicken broth containing fat
- Orange juice

Examples of a clear liquid:

- Gatorade or a similar sports drink containing electrolytes is preferred
- Water
- Black coffee or tea (sugar or honey without honeycomb are allowed)
- Cranberry, grape or apple juice
- Jell-O without any solids in it
- Soft drinks

Medications, tobacco, alcohol, recreational drugs

- Before surgery, your routine medication instructions will be discussed with your Pre-Anesthesia Testing (PAT) nurse.
- No tobacco or vaping after midnight the night before your surgery.
- No marijuana or alcohol three days before surgery.
- Please speak with your doctor about any other recreational drug use.

For more information, please talk to your provider or nurse.



Infection Prevention: Preparing Your Skin for Surgery

It is important to prepare your skin before surgery to help prevent post-surgical infections. Medical literature shows that most post-operative infections come from the microbes that normally live on our skin. These stepwise instructions and video show you how to prepare your skin with a special antiseptic soap, Hibiclens® (or the generic is chlorhexadine gluconate 4%). The goal of this process is to reduce the amount of microbes on your skin prior to surgery to help reduce the chance of post-op infection.



The fight against infection begins at home.
View Skin Prep Video at bch.org/skinprep

Guide to Skin Cleansing at Home

Prepare your skin by taking a whole-body shower with Hibiclens every day starting THREE DAYS prior to your surgery and on the DAY OF your surgery.

Date to start preparing your skin: _____

Date of Surgery: _____

Skin Prep Checklist:

As you complete this process each day, check off that you completed and either take picture of this form or bring this paper on the day of your surgery.

Day 1: Day 2: Day 3: Day of Procedure:

Before you bathe or shower:

- Gather Hibiclens, clean towels and washcloths to make them easy for your to access.
- Review any additional instructions given to you by your healthcare practitioner prior to starting your skin cleansing protocol.
- Carefully read all directions and warnings on the product label.

When you bathe or shower:

Hair:

- Wash your hair at least ONE DAY PRIOR to surgery with your regular shampoo.
- Thoroughly rinse hair and body to remove any shampoo residue.
- You are getting brain surgery and should wash your hair with Hibiclens with the same schedule as the face and body.

Face and Body:

- Stand under the shower using WARM (not hot) water and wet your entire body.
- Apply Hibiclens directly on your skin or on a clean wet washcloth and wash gently.
- Lather Hibiclens soap over your ENTIRE body including chest, back, arms, legs, feet, neck and face. It is okay to work in sections. Take care to not get the soap in your eyes
- Your provider is recommending particular focus on cleansing of this area: _____
- Move away from the shower stream to let Hibiclens sit on your skin for at least 2-3 minutes before rinsing off. This is important to allow this special soap to work.
- **DO NOT** use your regular soap after applying and rinsing Hibiclens.
- Dry off with a clean towel.

Avoid:

- **DO NOT SHAVE** near where you are having surgery starting FIVE days prior to your surgery.
- **DO NOT APPLY LOTIONS** or perfumes to your skin after this process.
- You are getting a surgery in which you should NOT apply deodorant the day prior to surgery.

Teeth:

- Brush your teeth twice daily with your regular toothpaste.

FAQ for your Surgery

Why do I have to come in so early before my surgery?

There are many things we need to do to prepare for your surgery like take your temperature, blood pressure, heart rate and listen to your lungs.

You will meet with your anesthesiologist before your surgery.

We may have to shave and/or wash your surgical site.

We will answer any questions you may have and make sure you are safe during your hospital visit.

Will I have my surgery at the time I am scheduled?

Your scheduled surgery time is an estimated time. Cases may take a shorter or longer amount of time. This is why we cannot give you an exact scheduled time. Also, emergency surgeries can change our daily schedule. We will make every effort to do your surgery on time and will keep you and your family informed of any delays. Please feel free to ask if you have any concerns.

Why can't I eat or drink before my surgery?

If your stomach is empty, the risk of vomiting during surgery is greatly reduced. See the handout in this packet titled "Eating and Drinking Before Surgery" for more information.

What should I wear/bring to the hospital?

- Wear loose fitting, comfortable clothing.
- Remove jewelry in case you have any swelling after your surgery.
- It is best to leave valuables at home or with your family.

Can I have a visitor stay with me before or after my surgery?

We have updated our visitation policy due to respiratory virus season. There are no restrictions for visitors of surgery patients, however, visitors under the age of 12 are **not allowed** in either pre- or post-surgery areas unless it is in the best interest of the patient. While masking is now optional at BCH facilities, masking is **required** for visitors during contact in patients with high-risk medical conditions.

What should I expect on the day of surgery before I go to the procedure room?

- Let the nurse know if you have any skin breakdown or skin issues.
- Iodine swabs will be applied twice to the inside of each of your nostrils. Let your provider know ahead of time if you are allergic to iodine.
- Clippers may be used for hair removal (not a razor).
 - Your surgical site will be cleaned with a special soap that kills germs before surgery.
- If needed, antibiotics will be given in your IV before your surgery begins.

What are health care providers doing to make sure the surgical site is clean?

Your health care providers will:

- Clean their hands and arms up to the elbows with an antiseptic soap just before the surgery.
- Wear hair covers, masks, gowns and gloves during surgery to keep the surgery area clean.
- Clean the skin at the surgery site with a special soap that kills germs.

What should I do after my surgery (postoperatively)?

- Keep your hands clean. This is one of the most important things you can do to avoid getting sick and spreading germs to others. You can wash your hands with soap and water or use hand sanitizer.
- Change your dressing as directed by your surgeon.
- It is important to continue to take your medications as prescribed.

How will I feel after my surgery?

- You may feel cold or have the chills. We do have warm blankets on hand.
- Noises may seem louder than usual and your eyesight may be blurred.
- You may have a dry mouth.
- You may experience pain from your surgical site. With this in mind, your care team will have a plan for you to ensure you are comfortable as you heal.

When will I be allowed to go home?

Recovery time depends on the person.

- When you are awake and doing well you will sit up in a chair.
- Your nurse will go over your care instructions before you leave.
- You need to have someone stay with you for the first 24 hours in case you have a reaction to any of the medications we gave you.
- You need to have someone drive you home.
- If you will be spending a night or more in the hospital, you will be taken to your room after your recovery period. The nurses will go over your instructions before you go home.

When can I go back to my usual activities?

- You should not drive a car for 24 hours after your surgery.
- Your surgeon will discuss going back to work and exercising with you, depending on any limitations you may have.

What danger signs should I call my surgeon about?

- Too much bleeding.
- Signs of infection such as swelling, the surgical area feeling warm, increased pain, red streaks on your skin, drainage from the wound, or a fever of 100.6°F or higher.
- Trouble breathing (call 911).
- If you can't urinate.

For more information, please talk to your surgeon or nurse.

Your Rights and Protections Against Surprise Medical Bills

Beginning January 1, 2022, Federal Law protects you¹ from “surprise billing” and “balance billing.”

When you get emergency care or are treated by an out-of-network provider at an in-network hospital or ambulatory surgical center, you are protected from balance billing. In these cases, you shouldn't be charged more than your plan's co-payments, co-insurance and/or deductible.

What is “balance billing” (sometimes called “surprise billing”)?

When you see a doctor or other health care provider, you may owe certain out-of-pocket costs, like a co-payment, co-insurance, or deductible. You may have additional costs or have to pay the entire bill if you see a provider or visit a health care facility that isn't in your health plan's network.

“Out-of-network” means providers and facilities that haven't signed a contract with your health plan to provide services. Out-of-network providers may be allowed to bill for the difference between what your plan pays and the full amount charged for a service. This is called “balance billing.” This amount is likely more than in-network costs for the same service and might not count toward your plan's deductible or annual out-of-pocket limit.

“Surprise billing” is an unexpected balance bill. This can happen when you can't control who is involved in your care — like when you have an emergency or when you schedule a visit at an in-network facility but are unexpectedly treated by an out-of-network provider. Surprise medical bills could cost thousands of dollars depending on the surgery or service.

You're protected from balance billing for:

Emergency services: If you have an emergency medical condition and get emergency services from an out-of-network provider or facility, the most they can bill you is your plan's in-network cost-sharing amount (such as co-payment, co-insurance, and deductibles). You can't be balance billed for these emergency services. This includes services you may get after you're in stable condition, unless you get written consent and give up your protections not to be balance billed for these post-stabilization services.

Certain services at an in-network hospital or ambulatory surgical center: When you get services from an in-network hospital or ambulatory surgical center, certain providers there may be out-of-network. In these cases, the most providers can bill you is your plan's in-network cost-sharing amount. This applies to emergency medicine, anesthesia, pathology, radiology, laboratory, neonatology, assistant surgeon,

hospitalist, or intensivist services. These providers can't balance bill you and may not ask you to give up your protections not to be balance billed.

If you get other types of services at these in-network facilities, out-of-network providers can't balance bill you, unless you give written consent and give up your protections.

You're never required to give up your protections from balance billing. You also aren't required to get out-of-network care. You can choose a provider or facility in your plan's network.

When balance billing isn't allowed, you also have these protections:

- You're only responsible for paying your share of the cost (like the co-payments, co-insurance, and deductible that you would pay if the provider or facility was in-network). Your health plan will pay any additional costs to out-of-network providers and facilities directly.
- Generally, your health plan must:
- Cover emergency services without requiring you to get approval for services in advance (also known as "prior authorization").
 - Cover emergency services by out-of-network providers.
 - Base what you owe the provider or facility (cost-sharing) on what it would pay an in-network provider or facility and show that amount in your explanation of benefits.
 - Count any amount you pay for emergency services or out-of-network services toward your in-network deductible and out-of-pocket limit.

If you think you've been wrongly billed, call the federal phone number for information and complaints at 1-800-985-3059. Visit the website <https://www.cms.gov/nosurprises/consumers> for more information about your rights under the federal law.

Surprise Billing — Know Your Rights

Beginning January 1, 2020, Colorado State Law protects you² from "Surprise Billing," also known as "Balance Billing." These protections apply when:

- You receive covered emergency services, other than ambulance services, from an out-of-network provider in Colorado, and/or
- You unintentionally receive covered services from an out-of-network provider at an in-network facility in Colorado.²

What is surprise/balance billing, and when does it happen?

If you are seen by a provider or use services in a facility or agency that is not in your health insurance plan's provider network, sometimes referred to as "out-of-network," you may receive a bill for additional costs associated with that care. Out-of-network facilities or agencies often bill you the difference between what your insurer decides is the eligible charge and what the out-of-network provider bills as the total charge. This is called "surprise" or "balance" billing.

When you cannot be balance-billed:

Emergency services: If you are receiving emergency services, the most you can be billed is your plan's in-network cost-sharing amounts, which are co-payments, deductibles, and/or co-insurance.

You cannot be billed for any other amount. This includes both the facility where you receive emergency services and any providers that see you for emergency services.

Please note that not every service provided in an emergency department is an emergency service.

Non-Emergency services at an in-network facility by an out-of-network provider: The facility or agency must tell you if you are at an out-of-network location or at an in-network location that is using out-of-network providers. They must also tell you what types of services that you will be using may be provided by an out-of-network provider.

You have the right

To request that in-network providers perform all covered medical services.

However, you may have to receive medical services from an out-of-network provider if an in-network provider is not available. In this case, the most you can be billed for covered services is your in-network cost-sharing amount which are co-payments, deductibles, and/or co-insurance. These providers cannot balance bill you for additional costs.

Additional Protections

- Your insurer will pay out-of-network providers and facilities directly.
- Your insurer must count any amount you pay for emergency services or certain out-of-network services (described above) toward your in-network deductible and out-of-pocket limit.
- Your provider, facility, hospital, or agency must refund any amount you overpay within 60 days of being notified.
- No one, including a provider, hospital, or insurer, can ask you to limit or give up these rights.

If you receive services from an out-of-network provider or facility or agency in any other situation, you may still be balance billed, or you may be responsible for the entire bill. If you intentionally receive non-emergency services from an out-of-network provider or facility, you may also be balance billed.

If you think you have received a bill for amounts other than your co-payments, deductible, and/or co-insurance, please contact the billing department, or the Colorado Division of Insurance at 303-894-7490 or 1-800-930-3745.

BCH Supplement to Out-of-Network Disclosures

Boulder Community Health (BCH) is a participating provider in many health plans and networks. BCH will provide you with a list of plans in which we participate upon request.

Some health plans may use smaller networks for certain products and services they offer, so it is important to check whether BCH participates in the specific plan you are covered by.

BCH would like you to understand that the physician services you receive at our facility are not included in hospital charges. Physicians who provide services at BCH may be independent physicians or they may

be employed by BCH. Independent physicians bill separately for the services they provide and may or may not participate in the same health plans as BCH. You should check with the physician arranging your hospital services to determine which plans he or she may participate in.

Physicians employed by BCH, including those listed below, participate in the same plans and networks that BCH participates.

- Hospitalists
- Intensivists
- Cardiologists at Boulder Heart
- Neurologists at Associated Neurology
- General Surgeons at Boulder Valley Surgical Associates
- Primary Care Physicians at all BCH Ambulatory Clinics
- Infectious Disease Physicians at Beacon Clinic

To the best of our knowledge, hospital-based physicians, those physician groups that BCH contracts with to provide services within the BCH facility, participate in the same plans and networks that BCH participates. Hospital-based physicians include the following:

- Emergency Medicine Physicians
- Anesthesiologists
- Radiologists
- Pathologists

You should refer to your individual policy or summary of benefits for more information about your out-of-network benefits and coverage and costs for in-network services.

If you have questions about whether BCH is in-network with your insurance, please contact Financial Counseling at 303-415-8115.

If you have questions about whether your provider is in-network with your insurance, please contact your provider's office directly.

NOTES:

1. This law does not apply to beneficiaries or enrollees in Medicare, Medicaid, Indian Health Services, Veterans Affairs Health Care, or TRICARE. These programs have other protections against high medical bills. The protections also don't apply to short-term limited duration insurance (STLDI), excepted benefits, or retiree-only plans; or account-based group health plans.
2. This law does not apply to all Colorado health plans. It only applies if:
 - You have a "CO-DOI" on your health insurance ID card, and
 - You are receiving care or services provided at a regulated facility in the state of Colorado.

Please contact your health insurance plan at the number on your health insurance ID card or the Colorado Division of Insurance with questions.

Patient Rights and Responsibilities

Patient Rights

BCH respects the right to treatment and care of all our patients and their families. You or your designated proxy have the right to:

Decision Making

- Be informed of your rights before patient care is given or discontinued, whenever possible.
- Have your physicians and people you choose notified of your admission.
- Receive complete and current information regarding your health status including diagnosis, treatment, risks and benefits of treatment, serious side effects, alternatives to treatment and consequences of not receiving treatment in a way you can understand.
- Participate in care planning, treatment and discharge arrangements, and costs.
- Give or withhold informed consent regarding care and treatment.
- Participate in managing your pain effectively.
- Request a specific treatment.
- Have a family member, friend or other individual be present for emotional support during the course of your stay. You will be informed if a restriction or limitation is in place for your health or safety.
- Refuse or discontinue a treatment to the extent permitted by law and to be informed of the consequences of such refusal.
- Have information about the outcomes of care, treatment and services that have been provided, including unanticipated outcomes.
- Request a second opinion.
- Request that an in-network healthcare provider provide services, if available.
- Create an advance directive, which includes your wishes relating to end-of-life decisions, and be informed if these cannot be honored.
- Donate organs.
- Be protected and have your rights respected during research, investigation, and clinical trials involving human subjects.
- Consent to records or films made for purposes other than patient care.
- Receive care and/or referral according to the urgency of your situation. When medically stable, you may be transferred to another facility after the need has been fully explained.

Quality of Care

- Respectful treatment which recognizes and maintains your dignity, values, beliefs and preferences.
- Care in a safe setting.
- Be free from mental, physical, sexual and verbal abuse, neglect and exploitation.
- Know who is primarily responsible for your care and receive adequate information about the professional status of person(s) responsible for the delivery of your care, treatment and services.
- Pastoral and other spiritual support services.
- Access to protective and advocacy services.
- Information about continuing health care requirements following discharge.

Confidentiality and Privacy

- Personal privacy including the right to be interviewed and examined in surroundings designed to assure reasonable audio and visual privacy.
- Personal information being shared only with those who are involved in your health care.
- Confidentiality of your Protected Health Information and access to disclosures of your information.

Access to Medical Records

- Review and get a copy of your medical records at any time (behavioral health records are an exception).
- Request an amendment to your medical record. Grievance Process
- Voice a complaint to your health care providers and administrators without fear of reprisal.
- Contact the Patient Representative to file a complaint/grievance and/or access protective and advocacy services. At Boulder Community Health dial 303-415-7054.
- Receive a timely response with the results of your complaint. Unresolved complaints are directed to a hospital's vice president who responds within 7 days. Appeals may be made at any time to the Colorado Department of Public Health and Environment, 4300 Cherry Creek Drive South, Denver, CO 80246-1530, 303-692-2000 or 303-692-2827; the Joint Commission Office of Quality and Patient Safety, patientsafetyreport@jointcommission.org, One Renaissance Boulevard, Oakbrook Terrace, IL 60181; or to Colorado Department of Regulatory Agencies (DORA), Division of Registration, 1560 Broadway, Suite 1350, Denver, CO 80202, www.dora.state.co.us.

- Grievances involving behavioral health services should be directed to Colorado Behavioral Health Administration, 710 S. Ash St. C140, Denver, CO 80246, 303-866-7400, bha.colorado.gov.
- Request an ethics consultation if there are questions of value judgments or moral conduct.
- Grievances involving discrimination on the basis of disability, or retaliation under Section 1557 of Affordable Care Act (ACA) 2010, may file a grievance by contacting the Patient Representative. Dial 303-415-7054 or by contacting the Office for Civil Rights, Region VIII, U.S. Department of Health and Human Services, 1961 Stout Street, Room 1426, Denver, CO 80294, 303-844-2024, Fax 303-844-2025, TDD 303-844-3439.

Accommodations

- Interpreters and/or communication tools to assist language needs tailored to age, languages and understanding.
- Obtain information about the existence and location of services, activities, and facilities that are accessible to and usable by all interested parties.
- Request reasonable accommodations.

Seclusion and Restraints

- Be free of any sort of restraint unless medically necessary.
- Be free from seclusion or restraint for behavioral management unless there is a need to protect your physical safety or the safety of others.

Billing

- An itemization of your bill and charges within 7 days of your request.

Psychotherapy

- I understand that if seen by a psychologist, counselor or Licensed Clinical Social Work (LCSW) at BCH, I have the right to receive information about that person's credentials, methods, duration of the therapy and fee structure. I understand that I may seek a second opinion or terminate therapy at any time. I understand information I may provide in counseling is confidential and exceptions that arise during the therapy will be discussed with me. Sexual intimacy within a professional relationship is never appropriate and should be reported to the State Grievance Board at 1560 Broadway, Suite 1350, Denver, CO 80202 or 303.894.7766.

Patient Responsibilities

You and your representative(s) have the responsibility to:

Provide Information

- Provide accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other health-related matters.
- Report perceived risks in your care and unexpected changes in your condition.
- Understand your treatment plan, ask questions when needed.
- Provide accurate and updated information for insurance and billing.

Involvement

- Actively participate in your treatment by following your recommended treatment plan.
- Express any concerns about your ability to follow the treatment plan.
- Accept consequences of outcomes if you do not follow the treatment plan.
- Speak up about concerns you may have about the quality of your care and treatment.

Respect and Consideration

- Act in a respectful and considerate manner toward health care providers, other patients and visitors. Physical or verbal threats are not tolerated.
- Follow the hospital's rules and regulations.
- Respect the property of others.
- Be mindful of noise levels.

Insurance and Billing

- Know the extent of your insurance coverage.
- Know your insurance requirements such as preauthorization, deductibles and co-payments.
- Call the hospital's billing office with questions or concerns.
- Fulfill your financial obligations as promptly as possible.