

# MARK YOUR CALENDAR

## Minnetonka AMBULATORY SURGERY CENTER

In partnership with  North Memorial Health

### PREPARING FOR YOUR SURGERY

#### Minnetonka Surgery Center

We look forward to partnering with you to support your goals toward a healthier, more active lifestyle. At Minnetonka Ambulatory Surgery Center, you are the center of the care team—and we've brought together the essentials you need to know to be prepared for surgery.

***Why these instructions are important:*** For your safety, failure to follow these guidelines may result in canceling your procedure. Please carefully review all the materials as soon as your surgery is scheduled.

*Your surgeon's office will provide MinnetonkaASC with your procedure details.*

*If you need to reschedule, please contact your surgeon's office.*

#### MY SURGERY DETAILS

**Name:** \_\_\_\_\_

**Date of surgery:** \_\_\_\_\_

**Surgeon:** \_\_\_\_\_

**Procedure:** \_\_\_\_\_

#### WHEN WILL I KNOW MY EXACT SURGERY TIME?

- » Our nursing staff will contact you one to two days before your procedure
- » If you haven't spoken to a nurse within a day of surgery, call us at **(651) 968-5755**
- » The nurse will verify arrival time, review your medical history, and answer any specific questions you may have

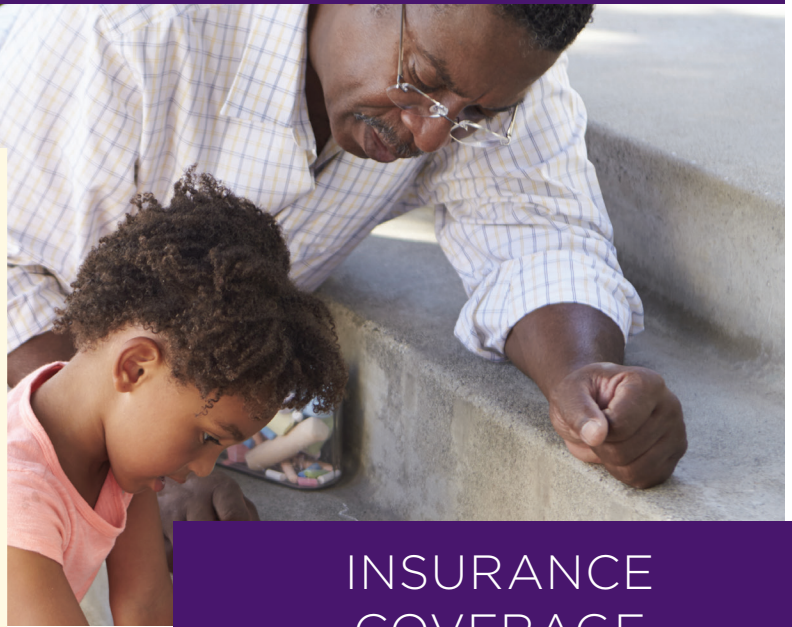
# PLANNING FOR YOUR SURGERY

## WHAT IF I HAVE QUESTIONS?

If you have questions before your call with the nurse, please feel free to reach out to MinnetonkaASC.

## ALERT US IF THERE'S A CHANGE IN YOUR HEALTH

At any time leading up to surgery, contact your surgeon if you have a change in your condition—such as a cold, fever, or an important change in the condition for which you are having surgery.



## INSURANCE COVERAGE

### CHECK WITH YOUR INSURANCE REGARDING:

- » Any precertification requirements
- » If Minnetonka Ambulatory Surgery Center is in your health plan's network

## AS SOON AS SURGERY IS SCHEDULED

### » ARRANGE FOR A RESPONSIBLE ADULT TO DRIVE YOU HOME AFTER SURGERY

If you plan to use public transportation, you still must have a responsible adult ride home with you.

Notes: \_\_\_\_\_

### » HOME CARE AFTER SURGERY

Arrange for an adult to stay with you for 24 hours following your surgery.

Notes: \_\_\_\_\_

### » ARRANGE CARE FOR YOUNG CHILDREN ON SURGERY DAY

We recommend small children stay at home with a loved one or sitter, rather than come with you on surgery day.

Notes: \_\_\_\_\_

## BILLING

Depending on the type of coverage that will be applicable to your procedure, you may see a bill for anesthesia services, facility fees and a physician service.

For all cosmetic procedures, you will be contacted by the Business Office to pre-collect any facility and anesthesia fees. These fees will be due prior to the date of surgery and will be collected at time of call with the MinnetonkaASC/SummitOrtho Business Office.

Your healthcare provider is referring you to a facility or service in which your healthcare provider has a financial or economic interest.

## FINANCIAL ASSISTANCE

Providing access to necessary medical care, regardless of one's ability to pay, is important to us. We offer a charity care program to patients who cannot afford to pay their medical bills. Eligibility for the charity care program is based on a patient's individual and family income. Contact the surgery center for further information.

## PAPERWORK

### INSURANCE FORMS, DISABILITY FORMS, FAMILY AND MEDICAL LEAVE ACT (FMLA) FORMS, ETC.

- » If your procedure is covered or a portion is covered by insurance, your Surgeon will complete the verification of coverage and any prior authorization requirements
- » Patients who are self pay, your surgeon will discuss payment process with you
- » Self Pay patients, payment is to be paid in full prior to date of service

# HISTORY & PHYSICAL EXAM

## » SCHEDULE A HISTORY & PHYSICAL EXAM WITH YOUR PRIMARY CARE PHYSICIAN

This appointment must take place within 1 to 30 days of your scheduled surgery.

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Location: \_\_\_\_\_

Exam Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## ABOUT THE HISTORY & PHYSICAL EXAM

- » Prior to your procedure, it's required to make sure you are healthy and cleared for surgery
- » Please provide copy of the form included in this packet
- » Ask the doctor to fax the results to (651) 730-3563
- » Get a copy of the form to bring with you on the day of surgery
- » Don't have a primary care physician? Let us know; we can help

**All menstruating patients, including those under the age of 18, need a current pregnancy test completed by a medical professional within 7 days of your surgery date. Bring a copy of the pregnancy results with you on the day of surgery. Your surgery may need to be canceled if this is not completed.**

## MEDICATION INSTRUCTIONS

### TALK WITH YOUR PRIMARY CARE DOCTOR

- » Blood thinners or anticoagulant medication

Notes: \_\_\_\_\_

- » Anti-inflammatory medication

Notes: \_\_\_\_\_

### MEDICATIONS AFTER SURGERY

Your surgeon will discuss and provide prescription(s) required pre/post surgical procedure.

**Opioids should only be used as needed and as prescribed.**

**Prescription refills:** Contact your surgeon two days in advance of needing a refill.

## DAY BEFORE SURGERY

### 24 HOURS PRIOR TO YOUR PROCEDURE

- » Take routine medications as directed by your physician with only a sip of water
- » Brush your teeth and rinse, but do not swallow the water
- » Take a bath or shower prior to coming to your surgical procedure
- » Remove makeup and nail polish. Acrylic nails do not need to be removed
- » No smoking or nicotine use after midnight the day before surgery
- » Do not consume any alcohol

### FOOD AND DRINK INSTRUCTIONS

No food or drink after 11 p.m., including gum or mints.

### NICOTINE PRODUCTS

Continued use of nicotine-containing products can greatly increase the risk of delayed wound healing, infection, and bones not aligning properly.



# DAY OF SURGERY & YOUR SURGERY LOCATION

## WHAT TO BRING + LEAVE AT HOME

- » Insurance card (if applicable)
- » Photo ID
- » Copy of completed History & Physical exam results (Please have your provider fax to Minnetonka ASC prior to date of procedure)
- » Assistive devices (crutches/knee scooter/walker)
- » Hearing aid(s)
- » Glasses or contacts case/solution (if applicable)
- » **For minors:** Bring a photo ID of the parent or guardian accompanying the patient. Guardians must also bring the appropriate forms of guardianship
- » Do not bring rings, jewelry, or valuables

## WHAT TO WEAR

Wear loose-fitting, comfortable clothes. Do not wear jean shorts or jeans. Elastic waistbands preferred.



## MINNETONKA SURGERY CENTER

15450 Highway 7  
Suite 200  
Minnetonka, MN 55345

We measure and compile the results of our patients' care and share that information with the community. We believe that transparency of results across healthcare allows patients to better understand what to expect, and to compare other doctors and facilities.

## AFTER YOUR PROCEDURE

You will be taken to our recovery room for observation and monitoring. In most instances, a family member may wait with you. You will be given postoperative instructions, and a nurse will answer any questions you may have.

## We want to hear about your experience!

### WHY YOU MAY RECEIVE A PATIENT SURVEY FROM THE MINNETONKA SURGERY CENTER:

Hearing from you about your experience at Minnetonka Surgery Center will help us identify opportunities to improve the way we care for patients.

### PATIENT SURVEY QUESTIONS

#### Please contact:

Quality/Risk Manager  
(651) 968-5662

### OPTIONS FOR COMPLETING YOUR PATIENT SURVEY:

You can conveniently complete your patient survey by mail with a postage-paid return envelope, or online if you provided your email address.

Thank you in advance for taking time to provide feedback!

## Minnetonka AMBULATORY SURGERY CENTER

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### MINNETONKA SURGERY CENTER

Phone (651) 968-5755 | Fax (651) 730-3563

### CARE QUESTIONS FOLLOWING YOUR SURGERY

Please contact your surgeon directly

### APPOINTMENT SCHEDULING

Please contact your surgeon directly

### BILLING INQUIRES AT SUMMIT

(651) 968-5050