



WELCOME

Thank you for choosing Surgery Center at Westpark for your upcoming procedure. Please take a few minutes to read through the following information.

Our mission at Surgery Center at Westpark is to “prioritize high-quality, patient-centered care while keeping costs low. Our partnership with Holland Hospital and Shoreline Orthopaedics and Sports Medicine ensures that we provide exceptional orthopedic and musculoskeletal services. Together, we build trust and foster innovation through transparency and collaboration, creating a welcoming environment for all our patients.”

Features of our center:

- Knowledgeable and caring staff
- Free Parking
- Wi-Fi access for family and friends in the waiting area
- Advanced technology and state-of-the-art Operating Rooms

Contact Numbers

www.surgerycenteratwestpark.com

Surgery Center at Westpark: (616) 290-0912

Medical Questions / Concerns: (616) 396-5855 EXT. 211

Shoreline Orthopaedic Surgery Scheduling: (616) 396-5855 EXT. 224

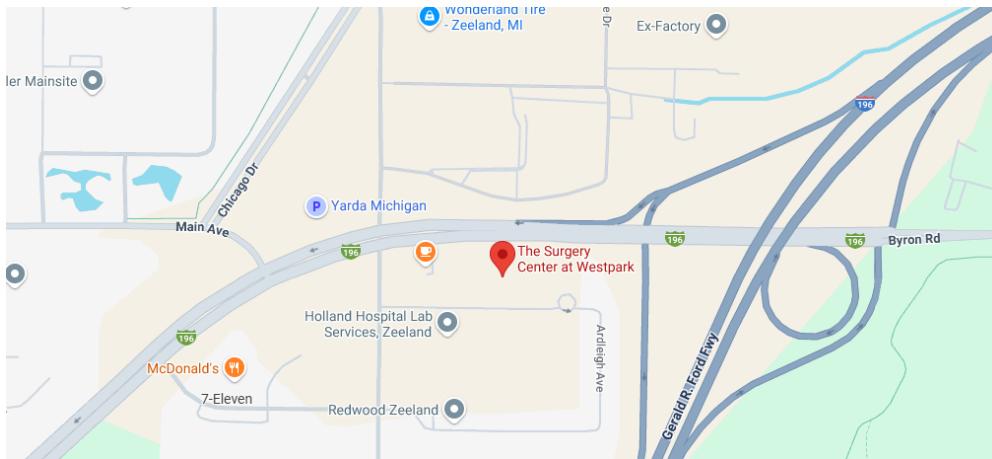
Billing Questions

- Facility Fee – 1 (866) 592-2929
- Anesthesia Fee – 1 (800) 222-1442
- Surgeon Fee – (616) 396-5855 EXT. 105

Address of Facility

Address: 8251 Westpark Way, Suite 200 Zeeland, Michigan 49464

Your surgery will be performed at Surgery Center at Westpark. Please use the main entrance. Once you go through the first set of sliding doors, use the elevator on the right to go upstairs to the surgery center.



From the North

- Take **I-96 E** toward Grand Rapids/Holland.
- Merge onto **US-31 S** toward Holland.
- Take **Exit 48** for **I-196 E/US-31** toward Grand Rapids.
- Keep left to stay on **I-196 E**.
- Take **Exit 39** for **84th Street**.
- Turn **right** onto 84th St, then **immediately right** onto **Westpark Way**.
- The Surgery Center at Westpark will be on your **left** near the end of the road.

From the South

- Head north on **US-31 N**.
- Take **Exit 48** for **I-196 E** toward Grand Rapids.
- Take **Exit 39** for **84th Street**.
- Turn **right** onto 84th St, then **right** onto **Westpark Way**.
- Continue to **8251 Westpark Way**—the Surgery Center will be on your **left** near the end of the road.

From the East

- Take **Central Ave** or **State St** heading west.
- Merge onto **I-196 W**.
- Take **Exit 39** for **84th Street**.
- Turn **left** onto 84th St, then **right** onto **Westpark Way**.
- The Surgery Center will be on your **left** near the end of the road.

From the West

- Take **Lakeshore Dr** or local roads heading east.
- Merge onto **I-196 E/US-31 N**.
- Take **Exit 39** for **84th Street**.
- Turn **left** onto 84th St, then **right** onto **Westpark Way**.
- The Surgery Center will be on your **left** near the end of the road.

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BEFORE YOUR PROCEDURE

We understand that you may have some questions and anxiety about your surgery. We want you to know that at the Surgery Center at Westpark, outpatient orthopedic surgery is our specialty. We will do everything possible to make you feel relaxed and comfortable.

Pre-Admission Phone Call

You will be contacted by the Surgery Center at Westpark staff prior to your surgery. Please have this document available when the nurse calls you. The following information will be covered:

- Medical history and allergies
- Past surgeries
- Anesthesia concerns
- Review of the medications you are taking including dose, time of day, and frequency of all prescriptions, over the counter medications, and vitamins / supplements / herbals.
- Discharge planning needs
- Pre-surgery instructions

You can expect to be called two weeks prior to surgery and again one to two days prior to surgery.

Medical Clearance and Testing

Your surgeon may tell you that you need to see your Primary Care or Specialty Physician prior to surgery for a preoperative history and physical. It is important that you keep this appointment, or the surgical center may cancel your surgery. If you can't make this appointment, call your doctor's office to reschedule.

To provide you with the safest care, you may need laboratory tests prior to your procedure. The surgery schedulers will instruct you when and where you will need to complete these lab tests. Failure to complete medical clearance and testing may result in your surgery being cancelled.



Medications, Over-the-Counter, Vitamins / Supplements, and Herbal Products

If you are on weekly injectable medication for weight loss or diabetes, please discuss with your surgeon at least 2 weeks prior to your surgery. Failure to discuss with your surgeon may result in your surgery being cancelled.

Discontinue vitamins, herbals, and supplements for 7 days prior to surgery if they are not prescribed by a physician. They may cause serious interactions with blood thinners or anesthetic agents. Examples of vitamins, herbals, and supplements include fish oil, vitamin E, ginseng, coenzyme Q10, and many others.

Medications that contain aspirin or anti-inflammatory medications (NSAIDs) including but not limited to Aspirin, Advil, Aleve, Ibuprofen, Motrin, and Naproxen may need to be held dependent on the procedure being performed. **You will be educated in your pre-admission phone call on holding these medications.**

If you are on blood thinners (i.e., Coumadin, Plavix, Xarelto, Eliquis, Aspirin, etc.), you will need to discuss stopping these with the prescriber of these medications. Your doctor will determine if it is safe to stop the blood thinners before surgery.

NOTE: If you are not sure whether you should stop or adjust your medication before surgery, ask the doctor who prescribed the medication.

Insurance / Advanced Directives

Please bring your insurance card and picture identification with you on the day of surgery. If you have an advanced directive, please bring a copy with you to the surgery center. We do not honor advanced directives or living wills. We will resuscitate, stabilize, and transfer you to the hospital, should an emergency arise. Your wishes stated within your advanced directive may be initiated upon arrival at a hospital.

Transportation and Post-Op Care

If you receive anesthesia, under no circumstance will you be able to drive yourself home. You must plan for a support person **to stay at the surgery center during your procedure, drive you home, and stay with you for the first 12-24 hours after your procedure.** The support person should be physically and mentally able to assist you. Please reach out to friends and family who may be able to serve in this role. **If you have not made arrangements to have a support person available, your surgery will be rescheduled.**



You may need medical equipment such as crutches, a walker, surgical boot or shoe, knee braces, or slings after your procedure. Please discuss this with your surgeon's office prior to your surgery and bring it to the surgery center on the day of your procedure.

Preparation of your home is an important part of your recovery period. Since you are at an increased risk of falling after surgery, remove loose throw rugs, place electrical cords and wires out of the way, and remove any additional fall hazards. Ensure that you have enough space to walk through your home with your assistive device, if applicable. Prepare a recovery area with the items you need most including eyeglasses, tissues, books, medications, TV remote, and cell phone. Plan meals ahead of time and prepare your sleeping area.

Additional Information

If you use any tobacco or nicotine products, it is recommended that you stop as soon as you are able. Proper healing after surgery is significantly important in the recovery process, and the use of nicotine and tobacco can inhibit healing. If you need help to quit, please discuss options available with your surgeon or primary care physician. You can also call 1-800-QUIT NOW (1-800-784-8669) for additional resources.

If you are unable to stop, it is important to ensure that you do not smoke or use tobacco containing products after midnight the night before your surgery. This includes cigars, cigarettes, e-cigarettes, marijuana, or chewing tobacco.

It is important that you do not use alcohol for at least 24 hours before and after your surgery.

PRIOR TO YOUR SURGERY

General Health

Notify your surgeon immediately if you develop any signs or symptoms of illness before surgery. This includes fever, sore throat, cough, cold, infection, pregnancy, or any unforeseen circumstances.

It is also important to notify your surgeon immediately if you have open sores, wounds, or cuts that are not healing before your surgery.

Children

We understand that you may have young children who depend on you for care. However, we kindly ask that you make arrangements for childcare on the day of your procedure. Wait



times can be long and unpredictable, which may lead to restlessness or disruptions that can impact the care environment.

Pre-Admission Phone Call

In addition to the phone call two weeks before surgery, you will receive a phone call one to two days prior to your scheduled procedure. The nurse will provide you with all your instructions on what to do the night before surgery and what medications to take the morning of surgery. They will also confirm your arrival time at the center and your surgical procedure time. Please remain flexible as surgery times may change, even on the date of surgery. We will call you as soon as possible about any necessary changes.

Pre-Operative Fasting Instructions

Please do **NOT** eat or drink anything after midnight, unless instructed otherwise. This includes water, smoking, gum, candy, and mints. It is very important you follow these instructions. Failure to follow these instructions may result in surgery delay or cancellation.

Attire / Valuables

Please dress comfortably as you may be changing into a gown. Wear casual, loose-fitting or short sleeved, non-restrictive clothing. Wear shoes that can easily slide on and off.

Please do not wear contact lenses on the day of surgery. Glasses are okay to bring. If you do not have glasses as an alternative, please bring a case for your contact lenses.

Please remove all jewelry prior to your surgery. This includes body piercings. All efforts should be taken to remove jewelry, if unsuccessful, please notify the nurse upon arrival.

Please leave all valuables and large amounts of cash at home. Do NOT bring to the surgical center.

Pre-Operative Showering Instructions

It is important that you do not wear makeup or apply lotion on the day of surgery.

Unless instructed otherwise by your physician or nurse, take a full shower or bath prior to your surgery. Remember that your daily routine may be different right after surgery, and it may be one to two days before you can take a shower or bath again.

You may be instructed to shower with a special soap called chlorhexidine gluconate (CHG or Hibiclens) before surgery. This helps to reduce the risk of infection. Steps for completing a Pre-Op Shower with CHG are outlined below:

1. Two showers are recommended. One the night before surgery and one the morning of surgery.
2. Wash your hair first utilizing your normal hair product. It is important that you end the shower with the CHG wash.
3. Use a clean washcloth or your hand for each shower. Please note that CHG is a pink / red color and may cause discoloration of the washcloth.
4. To prevent the CHG from being washed off too soon, turn off the water or move away from the water before applying the CHG.
5. Apply CHG to your entire body from the jaw level down. Please avoid the eyes, ears, nose, mouth, and genital area. Wash thoroughly for five minutes, paying special attention to the area where your surgery will be performed.
6. After washing thoroughly for five minutes, let the CHG sit on the skin for one minute. Turn the water on and rinse well. Do NOT use other lotions or soaps after rinsing off the CHG solution.
7. Pat yourself dry with a clean towel and wear freshly laundered clothing to bed.
8. The morning of your surgery, repeat the steps above, completing another shower with CHG. Dress in freshly laundered, loose-fitting clothing.

If you were given pre-op CHG wipes, please utilize those instead of soap.

What to Bring

A responsible adult who will remain at the surgery center during your procedure, drive you home, and serve as a support person for the first 12-24 hours after your surgery.

A copy of your advanced directive, if applicable. We do not honor advanced directives or living wills. We will resuscitate, stabilize, and transfer you to the hospital, should an emergency arise.

Other important documentation including photo identification and insurance information.

A medication list, especially if there have been changes since your pre-admission phone call.

Medical equipment including crutches, walker, surgical boot or shoe, knee braces, or slings.

Rescue inhalers or specialty medications including long-acting insulins.

CPAP in the case of an emergency that necessitates its use.

Cell phones and laptops may be utilized. Free Wi-Fi is available within the facility.



Patient representatives are welcome to bring a drink and / or snack. Please do NOT share with the patient.

What NOT to Bring

Do NOT bring jewelry or valuables. Surgery Center at Westpark is not responsible for lost, broken, or stolen items.

Do NOT bring prescription medications except for rescue inhalers or specialty medications, as mentioned above.

DAY OF SURGERY

People sometimes feel nervous or forgetful when having a procedure. It may help to write down any questions you wish to discuss with your care team prior to your surgery.

Registration

When you arrive at the facility, please take the elevator to the second floor. The elevator will take you directly to the lobby of the surgery center, where registration will occur.

As a reminder, please bring photo identification, insurance card, and advanced directive (if applicable).

Pre-Operative Area

Up to two representatives may accompany you during the admitting process.

The following tasks will be completed in the Pre-Operative Stage:

- You will be asked to change into appropriate surgical attire.
- Medications will be reviewed.
- Allergies with an associated reaction will be documented on your chart.
- Weight and vital signs will be obtained the day of your procedure.
- A physical assessment will be conducted prior to your surgery.
 - A urine pregnancy test may be required prior to your procedure.
 - An Intravenous (IV) Catheter may be initiated with fluids and an antibiotic, if deemed necessary.
- The surgical site may be shaved to avoid getting hair in the wound.



- It is possible that you will have to wear a compression device. These are used to help reduce the risk of blood clots.
- Last drinking and eating times will be discussed.
- The procedure will be confirmed, and consents will be signed.
- You will meet with anesthesia provider and surgeon to discuss the surgical plan and to address any questions or concerns.
- Depending on surgeon / anesthesia orders, medications may be administered in the pre-operative area. The nurse will explain all medications prior to administration.

Operating Room / Procedure Room

Your operating room nurse and / or anesthesia provider will meet you in the preoperative department and bring you to the operating room. Once you arrive in the operating room, your nurse and care team will work to make you comfortable. When your surgery is finished, you will move on to the recovery room.

The length of time you will be in surgery depends on your procedure. Please ask questions if you are unaware of how long surgery is planned for.

NOTE: A responsible driver / support person must remain on site during and after your surgery. It is important that your responsible adult be available to talk to the surgeon after your surgery is complete and review discharge instructions in the recovery phase.

Recovery

It is not unusual for you to feel drowsy, dizzy, confused, or nauseous during recovery. The length of your recovery time depends on your health progress.

Please know that pain is expected. You will be asked to rate your pain on a scale from 0-10, where 10 is the worst pain that you have ever experienced. Our goal is to keep you as comfortable as possible. Medications and other techniques will be utilized in the recovery phase, if necessary.

In the initial recovery period, the nurse will monitor your vital signs frequently. The nurse will also ensure that you are comfortable in terms of pain management and controlling nausea.



A light drink and snack will be given to you to ensure that you are able to tolerate oral intake.

Depending on your procedure, you may be required to take a short walk or complete exercises prior to discharge.

Instructions regarding your home care, as well as any written prescriptions, will be reviewed with both you and your designated patient representative. Please keep in mind that due to the effects of anesthesia or sedation, you may not retain all the information provided. For this reason, it is important to have a support person present who can understand the instructions and assist you at home.

Once all discharge criteria have been met, our staff will assist you into a wheelchair. Please ensure that a responsible adult is available to drive you home and remain with you for 12 to 24 hours following your procedure.

NOTE: You may feel groggy or have symptoms for the entire day of surgery. It is important to make a plan to rest and recover. Please call your surgeon if you have any problems or questions. They are on call 24 hours a day, every day.

CARE AT HOME AFTER SURGERY

Before you discharge from the surgery center, your care team will review discharge instructions to help manage your care at home. Here are some things that can also help in your recovery.

Coughing and Deep Breathing

After surgery, you may not be able to move as much as you normally do. Pain medication can also make it more difficult to expand and get rid of fluids in your lungs. This increases the risk of pneumonia. To help decrease the risk, it is important to cough on purpose and deep breathe. Try to cough and deep breathe ten times every hour while you are awake.

Diet

Diet is also an important component of your recovery. You should be able to return to a normal diet as tolerated post-procedure. Please note that your appetite may not be normal immediately after surgery. Please refer to your discharge instructions for your surgeon's instructions on diet.

Constipation can be common after surgery related to decreased mobility. Pain medications can also lead to constipation. Choose foods that are high in fiber and drink lots of fluids (six



to eight glasses of water daily). This will help to prevent constipation. **Avoid smoking and tobacco products.**

Activity / Exercise

Balance times of activity with rest periods throughout the day. Rest and activity are both important to your recovery.

Walking as soon as possible after surgery can improve oxygen and blood flow through your body. Please follow the surgeon's orders regarding mobility after your procedure. If you cannot walk or move about, practice pumping your ankles at least ten times every hour while awake. To practice pumping your ankles, bend your foot up and down at the ankle. This helps to contract calf muscles, pumping blood through your veins which prevents blood clots.

Skin Care

Skin care after your surgery is also an important part of your recovery. Your discharge instructions will include important information relating to skin care. Please talk to your care team about how you should care for your dressing(s) on your operative site.

Immobility after surgery can lead to bedsores. Bedsores are common on pressure areas including your tailbone, elbows, and heels. It is recommended to change positions at least every two hours to relieve pressure off these areas.

Physical Therapy or Occupational Therapy

You may require physical or occupational therapy following your surgery. Your physician will determine whether this therapy can be completed independently at home using prescribed exercises or if outpatient therapy is necessary. Your surgeon will make a plan that is right for you. **Doing instructed therapy is one of the most important parts of your recovery.**

BILLING

Your Rights and Protections Against Surprise Medical Bills

When you get emergency care or get treated by an out-of-network provider at an in-network Center or Ambulatory Surgical Center (ASC), you are protected from balance billing. In these cases, you shouldn't be charged more than your plan's copayments, coinsurance 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, such as copayment, coinsurance, and / or a deductible. You may have additional costs or must 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” describes providers and facilities that haven’t signed a contract with your health plan to provide services. Out-of-network providers may be permitted to bill you 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 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 procedure or service.

You are 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 copayments, coinsurance, 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 give written consent and give up your protection not to be balanced billed for these post-stabilization services.

Certain Services at an In-Network Ambulatory Surgical Center (ASC)

When you get services from an Ambulatory Surgical Center (ASC), certain providers there may be out-of-network. In these cases, the most those providers can bill you is your plan’s in-network cost-sharing amount.

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 the Following Protections:



- You're only responsible for paying your share of the cost (like the copayments, coinsurance, and deductibles 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.
 - Basing 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 deductible and out-of-pocket limit.

If You Think You've Been Wrongly Billed:

Please call Surgery Center at Westpark Billing Customer Service at (616) 394-3122 if you have a question about your bill.

You may also contact the State of Michigan Department of Insurance and Financial Services (DIFS) at (833) ASK-DIFS or (833) 275-3437, or visit <https://www.michigan.gov/en/difs/utilization-review/surprise-medical-billing> for more information about your rights under state law.

Visit www.cms.gov/nosurprises/consumers for more information about your rights under federal law. Or you can call (800) 985-3059 for information or to register a complaint



MY NOTES



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