our Mission: Provide world-class, physician-led health care using innovative technology and compassionate service with an intense focus on exceeding your expectations.

OUR VISION: USMD Hospital at Arlington will be the premier physicianled hospital, delivering exceptional patient care through a specialized staff, promoting health and wellness,

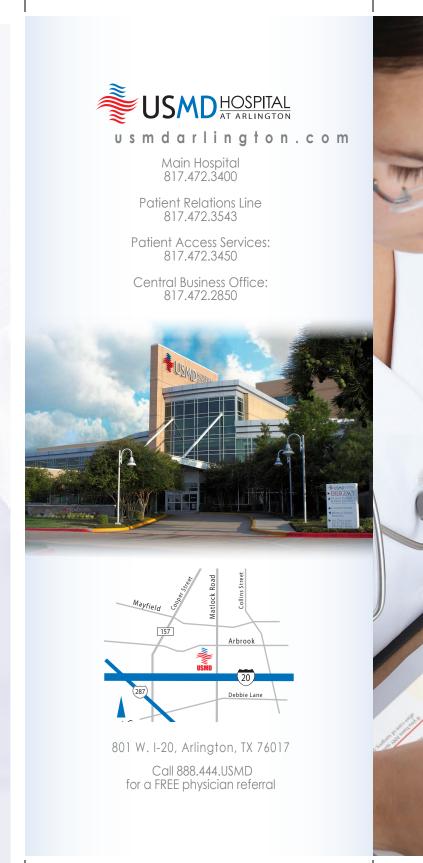
and setting the standard for patient satisfaction and outcomes.

ABOUT USMD: Our 1:5 nurse-to-patient ratio has helped us attain an "A" safety rating and an overall patient satisfaction rating in the top 5% of hospitals in the nation.

With nine state-of-the-art surgical suites, we are prepared to accommodate the following:

- General Surgery
- Gynecology
- Orthopedics
- Pain Management
- Pediatric & Adult Ear, Nose & Throat
- Plastic and Reconstructive Surgery
- Podiatry
- Spine Surgery
- Urology

If an overnight stay is required, our facility has 30 oversized, private inpatient suites and four surgical intensive care suites. Each room has accommodations for a family member or friend to spend the night.



USMDHOSPITAL
AT ARLINGTON

PATIENT

CHECKLIST

AND

INFORMATION

PRE-ASSESSMENT

A member of our scheduling staff will contact you to schedule an appointment for preoperative testing. You may also contact them at 817.472.3550 to set up your appointment. When you come for your pre-assessment appointment, you will need to provide the following:

Primary of number	are physician's name	and phone
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Pharmacy's name and phone number		Pharmacy	y's	name	and	ph	one	num	be
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- A list of all your medications
- A list of any drug allergies
- A list of any past surgeries

If you have any medical conditions, such as high blood pressure, heart problems, breathing problems or diabetes, you may be asked to see a cardiologist, pulmonologist, or your primary care physician prior to surgery for your safety.

If you are unable to keep your appointment, please call 817.472.3550. If you need to cancel your surgery, please call your surgeon.

If you have ANY questions regarding the before or after-care of your surgery, please contact your surgeon.

Please BRING the following with you to the hospital:

DOCUMENTATION

Driver's license
Insurance card

- Any special information from your surgeon such as X-rays, consents, orders, etc.
- Copy of advance directives, such as a living will or durable power of attorney.
- Legal guardianship papers. A parent or guardian must be available to sign all hospital required documents. If we are unable to verify legal guardianship, the procedure will be rescheduled pending appropriate documents being provided.

HOSPITAL CHECK-IN

Surgery Date:/				
Arrival Time:: a /p				
Your APPROXIMATE Surgery Time:				
: a /p				

Come directly to the Information Desk inside the Main Entrance.

FINANCIAL/INSURANCE BENEFITS

After your provider has scheduled your test or surgical procedure, your insurance benefits will be verified. The registration staff at USMD Hospital at Arlington will make a determination of your estimated financial responsibility and contact you as soon as possible.

Physician members of our staff who provide professional services are not employees of USMD Hospital at Arlington. Your surgeon, anesthesiologist, radiologist, pathologist, surgical assistant, and other specialists will bill you or your insurance carrier separately from the hospital.

If you have any questions regarding the status of any provider's participation in your insurance network, contact your insurance plan administrator or call the specific provider.

OTHER PROVIDER:

US Anesthesia Partners 972.715.5000

Ameripath 972.934.4300

ENVISION (Radiology Associates) 866.965.1093

INNOVATIVE HEALTH SYSTEMS (Arlington Emergency Medical Associates) 888.447.2450

PRE-OP DIETARY INSTRUCTIONS

All patients having anesthesia shall not eat or drink anything after midnight the night before surgery.

THE ONLY EXCEPTION IS a sip of water the morning of your surgery with your morning medications for blood pressure, heart, reflux, seizures or breathing conditions. An IV will be started for hydration and, if diabetic, your blood sugar will be monitored closely.

DAY-OF-SURGERY CHECKLIST

DAT-OT-SUNGENT CHECKEST
☐ Do NOT shave the surgical site.
Shower the morning of surgery with an antibacterial soap.
$\hfill \square$ Wear minimal make-up to the hospital.
Leave all valuables and jewelry at home, including wedding bands and body piercing jewelry. USMD Hospital is not responsible for lost valuables.
☐ Bring medications in original bottles.

PERSONAL ITEMS

Any personal assistive devices, such as CPAP, walker, inhalers, etc.
Contact lens/glasses cases Change of clothes, extra diapers, or pull- ups
Comfort items, such as blanket, doll, sippy

cup, bottle, formula, etc.

AFTER SURGERY

Wear	loose con	nfortable	clothing s	so that it
will go	easily over	er a large	dressing	or brace

You must have a licensed driver available
to drive you home. If a licensed driver is no
available your procedure may be
postponed.

					night,	bring	an
overn	ight	bag	with	toile	etries.		