

We look forward to your upcoming visit at Sound Surgeons Surgery Center!

Before your visit we would like to notify you of the following information.

As a Medicare licensed surgery center, we are federally required to provide in writing, as well as discuss with you the following information prior to your procedure.

1. HIPAA Notice of Privacy Practices
2. Patient rights and responsibilities
3. Physician ownership in our facility (in this brochure)
4. Advance directive information
5. Sound Surgeons ASC grievance process
6. Informed Consent process



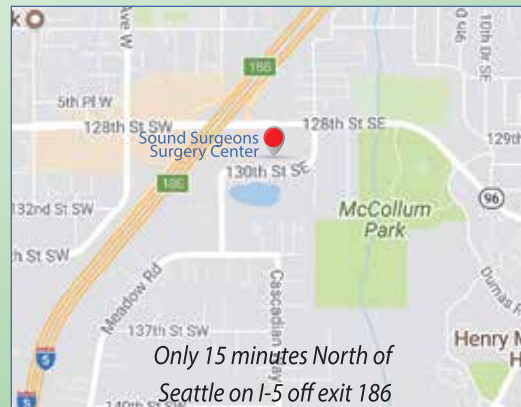
“Wonderful, wonderful staff! Everyone I came into contact with from check in to discharge was so good to me. I felt safe, and comforted the whole time, and the nurses were so helpful and caring.”

- Jenn, Everett WA

SURGERY CENTER HOURS OF OPERATION

| | |
|-----------|-----------------|
| Monday | 6:30am - 5:00pm |
| Tuesday | 6:30am - 5:00pm |
| Wednesday | 6:30am - 5:00pm |
| Thursday | 6:30am - 5:00pm |
| Friday | 6:30am - 4:00pm |
| Saturday | Closed |
| Sunday | Closed |

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Only 15 minutes North of Seattle on I-5 off exit 186



SOUND SURGEONS

SURGERY CENTER

Welcome!

Our mission is to provide the best care for all our patients.

We strive to restore health and change lives with:

- Comprehensive Care
- Education
- Long-term support

We accomplish this in a manner that respects our patients' differences and sensitivities.

Our goal is to ensure superior patient experiences and outcomes through the highest quality surgical services.



Main Phone: 425.224.8250 | Fax: 425.224.8298
125 130th Street SE, 1st Floor - Everett, WA 98208
e: info@nwwls.com

www.nwwls.com



Our Responsibilities To You:

- Attempt to contact you with instructions on how to prepare for your procedure.
- Attempt to contact you regarding your insurance and/or financial obligations.

Your Responsibilities as a Patient:

- Review the contents of this brochure & the documents you received with it.
- If the surgery center has not successfully reached you, please call us at least three days prior to your scheduled procedure. We can be reached M-F between the hours of 7:00am - 4:00pm. 425.224.8250
- Must be accompanied with a ride.
- Please bring this packet of documents with you on the day of your procedure.

Comments:

| |
|----------------|
| Patient Name: |
| Surgeon: |
| Procedure: |
| Check-in time: |

****Your surgery time is subject to change. Please make yourself available all day****

Special Requests:

No food or liquids after midnight. This includes no water, candy, gum or breath mints.



If you have anything by mouth after 11:59 pm, we will have to cancel your surgery.



Patient Complaint or Grievance

To report a complaint or grievance you may contact the facility Administrator by phone at 425.224.8200. The Administrator will investigate within seven days of receipt and make every effort to resolve it to the patient's satisfaction and provide a written response within 21 days. Additional contact information for state, federal, and our accrediting association is provided below.

Washington State Dept. of Health Complaint Hotline
1-800-Medicare 800.633.4227
7500 Security Blvd, Baltimore MD 21244.
www.medicare.gov/ombudsman/activities.asp

AAHC - 1-847-853-6060 to submit a verbal grievance regarding care without fear of recrimination and to have those concerns reviewed and resolved in a timely manner.

Advance Directives

Sound Surgeons Surgery Center supports an individual's rights to make informed health care decisions. Including the right to accept or refuse treatment and the right to formulate advanced directives. It is the policy of Sound Surgery Center that DNR orders be suspended while you are a patient at the center. In the unlikely event of a life-threatening emergency, professional staff will initiate resuscitation or other stabilizing measures and transfer you to an acute care hospital for further evaluation; regardless of the contents of any advance directives, existing DNR orders, or instructions from a health care agent or family member. At the acute care hospital, further treatment or withdrawal of treatment measures will be ordered in accordance with your wishes and/or advance directives.

If you have an advance directive, please notify your physician and bring a copy with you to Sound Surgeons Surgery Center so that it may be included in your medical record.

Physician Ownership Disclosure

| Physician | NPI # |
|-----------------------|------------|
| Dr. D. Alana Chock | 1497780209 |
| Dr. Robert Michaelson | 1861457038 |