MY PATIENT INFORMATION

GET WELL. STAY WELL. BOTHWELL.
FOR YOUR CONVENIENCE

Parking
Free parking for patients and visitors is available in all parking lots, 24 hours a day, 7 days a week.

Telephones
Telephones are provided in each room at Bothwell Regional Health Center. Local and toll-free calls may be made without charge by dialing 5 and the number. Long distance calls may be made collect or charged to your calling card. Your family and friends can call you by dialing 660-827-9 plus your three-digit room number.

Wi-Fi
Bothwell provides wireless access throughout the hospital so that you can access the Internet. See page 20 for more information.

Television
A television set is provided for each patient’s use. A channel guide is provided in your room. Also, if you are hearing impaired, closed-captioning is available.

PATIENT AND VISITOR SERVICES

ATM Service
An automated teller machine is located on the First Floor by the Gift Shop.

Cafeteria
The Bothwell Cafe is open daily from 7:30 a.m. to 6:30 p.m. and is located on the Ground Floor near the public elevators.

Vending Machines
Vending machines are located along the hallway to the cafeteria on the Ground Floor and on the First Floor near the Critical Care Unit waiting room. You also will find vending machines in the Progressive Care Unit Reception Area on the Second Floor.

Gift Shop
The Gift Shop is located on the First Floor and is operated by the Bothwell Regional Health Center Auxiliary. The Gift Shop is open from 9 a.m. to 8 p.m., Monday through Friday; 9 a.m. to 5 p.m. on Saturday; and 1 p.m. to 5 p.m. Sunday.

Chaplain Services/Chapel
Chaplain services are available for hospital patients, family and hospital staff. If you would like to talk with a chaplain, please ask a member of the hospital staff, and you will be put in contact with a chaplain. A chapel is available near the main elevators on the First Floor. See page 19 for more details.

Visit online at www.brhc.org or become a fan on Facebook.
You’re Priority One

Whether your admission was planned or unexpected, the staff of Bothwell Regional Health Center is committed to providing you and your family with exceptional care. We will make every effort to ensure your stay is as pleasant and comfortable as possible. Hospitals can be confusing, especially for those patients who have never been hospitalized before.

Hospitals are busy places, filled with seemingly endless corridors, strange equipment and unfamiliar people. But, the more you know about your surroundings, the more comfortable you’ll begin to feel.

If you have any questions, please let any of us on the Bothwell team know. We are dedicated to helping you and your family, and our goal is that you receive excellent care at Bothwell.

About Bothwell Regional Health Center

From its humble beginnings in 1930 when John Homer Bothwell Memorial Hospital first opened its doors, this health-care organization has developed into the state-of-the-art regional health system you see today. Bothwell Regional Health Center supports a full range of medical and surgical services. These services include cancer care, emergency services, orthopedics, cardiovascular care, obstetrics and gynecology, outpatient services, diagnostic imaging and community health and wellness education.

Accredited by The Joint Commission, Bothwell Regional Health Center offers high-tech medical diagnostics and treatment coupled with high-touch patient care. More than 800 employees support the medical expertise of more than 50 full-time medical staff.

Bothwell also features a network of clinics, outpatient service facilities and rehabilitation services located across the region.

Volunteer Opportunities

Bothwell Regional Health Center relies on community volunteers to help us deliver the services and attention our patients deserve. Volunteers assist our staff to make each patient’s stay as pleasant and comfortable as possible.

When you are well, you may want to give some of your time to Bothwell as a volunteer. For more information, please call 660-826-8833 and ask for our Volunteer Services Coordinator.

Bothwell Regional Health Center Foundation

Bothwell Regional Health Center Foundation supports the mission of Bothwell Regional Health Center and the health-care needs of the community through contributions from our patients, friends and employees.

A gift to Bothwell Regional Health Center Foundation helps provide resources to bring the best and most current medical services to our region. The Foundation offers opportunities to pay tribute to a loved one. Honorarium (the person is still alive) or memorial (the person is deceased) gifts are a great way to recognize someone important in a way that gives back to the community.

Gifts made to the Bothwell Regional Health Center Foundation are tax deductible. Contact Bothwell Regional Health Center Foundation: 601 E. 14th Street, Sedalia, MO 65301, 660-829-7786, or foundation@brhc.org.
Language Assistance

**English**  Attention: If you do not speak English, language assistance services are available to you free of charge. Call 1-660-829-7715

**Spanish**  ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-660-829-7715

**Chinese**  注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-660-829-7715。

**Vietnamese**  CHÚ Ý: Nếu bạn nói Tiếng Việt, có Các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-660-829-7715

**Serbo-Croatian**  OBAVIJEŠTENJE: Ako govornite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-660-829-7715

**German**  ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummber: 1-660-829-7715

**Arabic**

**Korean**  주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-660-829-7715

**Russian**  ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги переводов. Звоните 1-660-829-7715

**French**  ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-660-829-7715

**Tagalog**  PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika na wala ang walang bayad. Tumawag sa 1-660-829-7715


**Persian**

**Cushite**

**Portuguese**  ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, gratuitos. Ligue para 1-660-829-7715

**Amharic**
Patient Admission and Registration

About Patient Registration
The Patient Registration Department represents the key point of entry for all non-emergency hospital in-patients and out-patients. The Patient Registration office is located just past the waiting area, to the right of the health center’s main entrance, and is open from 6 a.m. to 5 p.m. Monday through Friday. Patients also may pre-register from 8 a.m. to 4:30 p.m. Monday through Friday. Emergency and after-hours registration is done 24 hours a day, seven days a week in the Emergency Department.

We ask because we care. By asking about your race, ethnicity and language, we are better able to deliver health care equally to all patients. Privacy, accuracy and assistance are the goals of the Registration Department. Staff members are required to gather a significant amount of information regarding your hospital visit. They also coordinate it with your doctor’s orders and the appropriate care team who will be assisting you. If you have NOT pre-registered, you will be asked to visit with our registration staff to complete registration information.

At the point of check-in, you will do the following:

- Sign consent forms.
- Have insurance cards copied to verify coverage and check for pre-certification.
- Verify your demographic information.

This all takes only a few minutes of your time. You may then proceed to respective points of service.

Contact Numbers
- Patient Registration 660-827-9400 (Main line) • 660-829-6615 (FAX)
- Pre-Registration (x-ray, cardiovascular, surgeries, pain clinic, rehab services, etc.) 660-827-9449 or 660-829-6693
- Supervisor of Patient Registration 660-827-9436
- Director of Patient Registration 660-827-9418

Inpatient vs. Outpatient Hospital Status
In an effort to detect and reduce Medicare waste, fraud and abuse, The Centers for Medicare and Medicaid Services (CMS) has increased scrutiny on the medical necessity of a one-day length of stay for inpatient admissions to hospitals. In response to this, Bothwell Regional Health Center is now screening inpatient admissions for medical necessity, and educating patients and their family members and providers, nurses, administration and other staff on the medical necessity requirements for inpatient status. The result has been an increase in the number of outpatient observation patients and an increase in confusion on what the differences are between inpatient vs. outpatient (observation) status. Below are questions and answers on CMS’s guidelines for inpatient vs. outpatient (observation) status, which will help you become more familiar with what they both mean.

Observation
If you have been admitted as an Observation patient per your physician’s orders, your admission is covered under Medicare Part B. Observation is considered outpatient even though you may stay in the hospital overnight. Oral medication taken during your stay as an observation patient is not covered by Medicare. Bothwell does not bill for “self administered” medications.

Did you know that even if you stay in the hospital overnight, you might still be considered an outpatient observation status?
Your hospital status (“inpatient” or “outpatient/observation”) affects how much your insurance pays and what you pay for your hospital services — such as X-rays, drugs, lab tests, etc. Each status carries a different co-pay or percentage of coverage. If you are on a Medicare plan, your hospital status may also affect whether Medicare will cover your care in a skilled nursing facility (nursing home) following your discharge from the hospital.
Who reviews a patient’s health admission information to determine the criteria?
Your health care team, which includes physicians, nursing staff and hospital case management staff (Utilization Management), reviews the medical record for the clinical information and applies research- based clinical criteria utilized by CMS that provides a recommendation for either “outpatient” or “inpatient” status. If further review is required, a third-party reviewer is used.

Your physician determines the final status, however. If Medicare does not agree with the determination, Medicare will not reimburse the hospital for costs incurred. The hospital costs may then be billed to the patient.

What is “inpatient” status?
Physicians and hospitals follow a specific set of clinical criteria (severity of illness and intensity of service needed to diagnose and treat) that assists in determining whether a patient meets medical necessity for an “inpatient” status in the hospital. The Centers for Medicare & Medicaid Services (CMS) has specific guidelines (medical necessity) on whether a patient should be Inpatient or Outpatient/Observation — depending on how severe the patient’s symptoms/condition is and how quickly they may respond to treatment.

What is “outpatient” status?
“Outpatient” status is commonly referred to patients who typically go to an outpatient department such as laboratory, radiology or to the Emergency Department for diagnostic services.

Your physician may write an order for you to be admitted as an outpatient/observation patient at Bothwell Regional Health Center. The observation stay is intended for short-term diagnostic testing and monitoring, which are reasonable to evaluate your condition. This is done to determine your need to be admitted to the hospital as a hospital patient or be discharged to go home.

Why am I an “outpatient/observation” patient instead of an inpatient?
Specific criteria (based on severity of illness and intensity of service) must be met in order to admit a patient to the hospital. In some cases it is not immediately clear whether you are well enough to go home or if hospitalization is needed until further testing/evaluation is completed.

What does a Medicare patient pay as an “inpatient”?
Medicare Part A (hospital insurance) covers inpatient hospital services. Generally, this means you pay a one-time deductible for all of your hospital services for the first 60 days you’re in the hospital. If you are hospitalized again after 60 days, Medicare may apply another deductible.

Medicare Part B (medical insurance) covers most of your physician services when you’re an “inpatient.” You pay 20% of the Medicare-approved amount for physician services after paying the annual Part B deductible.

Can a patient be an “outpatient” anywhere in the hospital, even if they were told they were being admitted to the hospital?
Yes. A patient can be receiving any service anywhere in the hospital (Radiology, Emergency Department or nursing floor) and still be considered an “outpatient” according to CMS guidelines. The term “outpatient” is used by Medicare and other insurance companies for billing status only, not patient care status.

What does a Medicare patient pay as an “outpatient” or “outpatient/observation”?
Medicare Part B covers outpatient hospital and physician services. Generally, this means you pay a copayment for each individual outpatient hospital service. This amount may vary by service.

For more detailed information on how Medicare covers hospital services, including premiums, deductibles and copayments, visit www.medicare.gov/Publications/Pubs/pdf/10050.pdf to view the Medicare & You Handbook, or call 1-800-MEDICARE (1-800-633-4227).

Why is it important to know if a patient is an “inpatient” vs. “outpatient/observation” status no matter if they are on Medicare or not?
If you or a family member is in the hospital more than a few hours, always ask the physician or hospital staff if you’re an “inpatient” or “outpatient/observation” because it WILL affect how you are billed and what you will have to pay for out-of-pocket.
How does “inpatient” vs. “outpatient observation” status in the hospital affect the way Medicare covers care for the patient in a skilled nursing facility (or nursing home)?

Medicare requires a “qualifying hospital stay” for Medicare A to cover care within a skilled nursing facility. A qualifying hospital stay is defined as a hospital “inpatient” for a minimum of three (3) days in a row — counting the day you were admitted as an inpatient, but not counting the day of your discharge.

For example, a physician may have determined that a patient be on “outpatient observation” status to help decide whether the patient needs to be admitted to the hospital as an “inpatient” or whether they should be discharged. During this time, the patient is still considered an “outpatient” even while receiving hospital services, which may include staying overnight multiple nights.

If you are still on an “outpatient observation” status, even if you have a three-day stay in the hospital, Medicare will not count this time toward the required minimum three-day hospital stay for your stay in a Skilled Nursing Facility. If you are ready for discharge, you may need to either pay part of your stay at a Skilled Nursing Facility or ask for other options for payment. The Case Manager or Social Worker can assist you and your family with these decisions.

If a patient has been in the hospital over 24 hours, do they get changed from “outpatient/observation” to “inpatient” status?

No. A patient status is only changed if they meet full “inpatient” medical necessity/severity of illness criteria.

Medicare, What Part A and Part B Covers

What Part A and B covers

Medicare covers services (like lab tests, surgeries and doctor visits) and supplies (like wheelchairs and walkers) considered medically necessary to treat a disease or condition.

If you’re in a Medicare Advantage Plan or other Medicare plan, you may have different rules, but your plan must give you at least the same coverage as original Medicare. Some services may only be covered in certain settings or for patients with certain conditions.

In general, Part A covers:

- Hospital care
- Skilled nursing facility care
- Hospice
- Home health service

Part B covers two types of services

Medically necessary services: Services or supplies that are needed to diagnose or treat your medical condition and that meet accepted standards of medical practice.

Preventive services: Health care to prevent illness (like the flu) or detect it at an early stage when treatment is most likely to work best.

You pay nothing for most preventive services if you get the services from a health-care provider who accepts assignment.

Part B covers things like:

- Clinical research
- Ambulance services
- Durable medical equipment (DME)
- Mental health
- Inpatient
- Outpatient
• Partial hospitalization
• Getting a second opinion before surgery
• Limited outpatient prescription drugs

Two ways to find out if Medicare covers what you need
Talk to your doctor or other health-care provider about why you need certain services or supplies, and ask if Medicare will cover them. If you need something that’s usually covered and your provider thinks that Medicare won’t cover it in your situation, you’ll have to read and sign a notice saying that you may have to pay for the item, service or supply.

Medicare coverage is based on three main factors
• Federal and state laws
• National coverage decisions made by Medicare about whether something is covered
• Local coverage decisions made by companies in each state that process claims for Medicare

Patient Advance Directives
A growing number of people are stating their health-care preferences before they become seriously ill. The written instructions they use to state their wishes are called advance directives. Before making these important decisions, we recommend that you discuss the issues and your personal wishes with your family, close friends, physician, attorney or clergy.

Missouri state law allows for a competent person, 18 years of age or older, to make sure your wishes are carried out if you are ever unable to make or communicate decisions about your health care.

Living Will or Written Health Care Directive
• Applies to “death prolonging procedure” and “terminal condition.”
• Allows you to state what procedures are not to be used to keep you alive.
• Must be in writing, dated and signed by you.
• Witnessed by two or more individuals 18 years of age or older who are not related, financially responsible or a beneficiary to you.

A legal health care directive covers a broader range of medical conditions that might arise.
• Simply write out your wishes, or you may use one of the forms that have been developed by various groups.
• Instructions are to be clear so there is no question about what you want done.
• Only avoids treatment when death is imminent and treatment is ineffective to avoid or delay death.

Durable Power of Attorney For Health Care
• Allows you to appoint another person to make health-care decisions for you and the types of treatment that may or may not be provided.
• Includes a statement allowing the person to make decisions for you when your instructions do not cover a specific decision and you are not able to make your own decision.
• Must be signed by you and witnessed by two other people and notarized.
• Your loved ones must honor your specific directions and the decisions made by the person named in your Durable Power of Attorney for Health Care.
• This person cannot authorize withholding or withdrawing of food and water unless you give specific authority to do so in the document.

You may have either a Living Will or Durable Power of Attorney for Health Care or both. You do not need an attorney to prepare a Durable Power of Attorney for Health Care, but it is an important document that must meet certain legal requirements. You may want to have your attorney look over your document for you.
Our Policy on Advance Directives
We believe it is your right to make health-care decisions. Our goal is to make certain your preferences are known and respected. If you have not previously documented your health-care preferences, the health-care team will take all reasonable steps to maintain your life.

Important Points
• Missouri law does not allow family members to make health-care decisions for adult patients unless specifically granted in a Durable Power of Attorney.
• An advance directive has no effect in the event you are pregnant.
• If you have an advance directive from another state, it will be accepted, but may not be fully enforceable if it fails to comply with Missouri law.
• An advance directive may be revoked at any time by any manner in which you are able to communicate.
• In the event your condition does not allow us to verify if you have an advance directive, all reasonable steps will be taken to maintain your life.

If you have any questions you would like answered, you may contact your nurse, chaplain, social worker or your physician.

The following organizations provide forms for advance directives:
• Center for Practical Bioethics (Formerly the Midwest Bioethics Center) Harzfeld Bldg., 1111 Main St., Suite 500, Kansas City, MO 64105, 816-221-1100, 800-344-3289
• The Missouri Bar, P.O. Box 119, Jefferson City, MO 65102, 573-635-4128
• The Missouri Hospital Association, P.O. Box 60, Jefferson City, MO 65102-0060, 573-893-3700
• Bothwell Regional Health Center, 660-826-8833 or on our website at www.brhc.org

Your Stay with Us
What You Will Need
While many items you will need during your stay at the hospital will be provided for you, you may want to bring a few personal items with you. You may find it helpful to pack the following, or have a relative or friend bring them to you:
• Pajamas or nightgown (available in the hospital, please ask if you need them)
• Robe and slippers
• Eyeglasses
• Personal toiletry items (toothbrush & paste, mouthwash, lotion, etc.)
• A small amount of money for incidentals
• A list of all your current medications with doses and schedules. Please include all over-the-counter medications, herbal medications, sample medications from your physician, the name of the pharmacy(s) where your medications are filled.

Electrical items you bring with you must be safety checked by a member of our facility management team before they can be used. Once you get to your room, ask your nurse to arrange for your electrical items to be safety checked.

If you wear glasses, contact lenses, hearing aids or prosthetic devices, please put them in their cases and keep them in a secure place when they are not in use. If you wear dentures, please ask your nurse for a container. Do not wrap dentures or hearing aids in a tissue or a paper towel as they could easily be discarded by accident. Bothwell Regional Health Center is not responsible for lost or damaged items. (See Lost Items page 10.)
What Not to Bring
Patients are asked not to bring items of value to the hospital. If you bring a valuable item, it should be deposited in the safe in the Registration area. You will be given a written receipt, which must be presented when you withdraw the item(s). Items kept in the safe can be accessed only once daily. The receipt will be kept on your chart while you are in the hospital. Bothwell Regional Health Center does not accept responsibility for items of value unless they are deposited in the safe.

Hospitalists
If you do not have a primary care physician or you see a physician who does not have privileges at Bothwell Regional Health Center, you may be assigned to one of our hospitalists. A hospitalist is a physician who specializes in caring for patients only while they are admitted to the hospital. These physicians usually do not have an office-based medical practice. Most hospitalists are internal medicine physicians or family practice physicians. Some hospitalists are trained as specialists in pulmonary/critical care medicine, cardiology or other subspecialties.

In case of emergency, hospitalists are never far away because they work in the hospital and will see you more than once a day, if needed. Your hospitalist knows every specialist and department in the hospital and assists you through a smooth and speedy recovery process by following up on tests and adjusting your treatment regimen through the day based on those test results.

The hospitalist may consult with your doctor, if you have one, maintaining regular communication with him or her during your stay to receive valuable information about your medical history, medications and special needs. When you are discharged from the hospital, your hospitalist may communicate with your primary care physician to discuss your further treatment needs.

Patients who receive services from the hospitalist or another physician during their stay may receive a separate bill from that physician or their practice.

Your Room
Your room assignment at Bothwell Regional Health Center is based on your admitting diagnosis and the bed availability on the day of your admission. You will be pleased to know that all of our rooms are private rooms. We know that a hospital environment may seem unfamiliar, but we try to make your room as cheerful and comfortable as possible. If you are not satisfied with your room, please let your nurse know.

Telephones
Telephones are provided in each room at Bothwell Regional Health Center. Local and toll-free calls may be made, without charge, at any time from the room by dialing 5 and the number. Long distance calls may be made collect or charged to your calling card. Follow the instructions on your calling card, or call the hospital operator if you need assistance. Your family and friends can call you by dialing the switchboard at (660) 826-8833 and asking for you by name or directly calling your room’s individual phone number which will be 660-827-9, plus your three-digit room number. Cell phones may not be used in some designated areas of the health center. Please ask a staff member if you have questions about using your cell phone.

Leaving the Unit
If you want to leave the unit, please check first at the nursing station to make sure your doctor has given approval and to let the staff know where you can be reached. It’s important to stay in your room until your doctor has made rounds and treatments have been completed.

Confidentiality
Nationally, the confidentiality of patients’ medical records has increasingly become a focus. The Health Insurance Portability and Accountability Act requires hospitals to take certain actions to ensure the protection of a patient’s right to confidentiality. Regardless of the law, respecting a patient’s right to confidentiality simply makes sense and is in line with the mission and values of Bothwell Regional Health Center. For more information on the confidentiality of your health information, please ask the staff member in the Registration Department.

Photographing, videotaping or audio taping of any care being rendered to a patient is strictly prohibited, except for furtherance of the patient’s medical treatment, for the purpose of medical education or for quality improvement.
Complaints
We welcome an opportunity to address any concerns that you may have regarding the privacy of your health information. If you believe that the privacy of your health information has been violated, you may file a complaint with our Patient Advocate, Privacy Officer, Health Information Management director, or Corporate Compliance Officer. A dedicated phone number of 800-887-8833 or 660-829-7715 is available or, if you wish, you may email your concerns to privacy@brhc.org.

In addition, you may also file a written complaint with the Secretary of the US Department of Health & Human Services at: US Department of Health & Human Services, 200 Independence Avenue, SW, Washington, DC 20201, 202-619-0257; Toll free 877-696-6775.

YOU WILL NOT BE PENALIZED OR RETALIATED AGAINST FOR FILING A COMPLAINT.

Safety and Security
Bothwell Regional Health Center is committed to providing a safe environment for patients, visitors and employees. Research has shown that injuries are more likely when we lift and move people and things that are greater than what our bodies can handle. The hospital has different kinds of equipment to assist our staff in helping patients move and turn in bed, get in and out of bed and slide from stretchers to beds. Employees are expected to, by policy, use appropriate equipment when moving and lifting patients. Our staff will explain how the equipment will be used so you will feel safe and comfortable.

Oxygen
Special regulations are in effect in areas where patients are receiving oxygen. Electrically operated equipment, aerosol products and balloons are not permitted in these areas.

Fire Drills
For your protection, the hospital conducts fire and disaster drills regularly. If a drill occurs while you are here, please remain in your room and do not become alarmed. The hospital is a fire-resistant building, and the staff is trained in fire protection. The staff will let you know if any action needs to take place.

Security
Bothwell Regional Health Center employs a full-time security staff made up of former police officers, correction officers and other security personnel. Armed security officers patrol the hospital at all hours. If you need to contact a security officer you can ask hospital staff, dial 0 for the hospital switchboard or extension 7777 to reach the Security Office.

Severe Weather
In the event of severe weather, your nurses and other hospital staff may move you to another area of the hospital. Please follow the directions of the hospital staff and do not become alarmed. The procedures were developed to help ensure the safety and care of our patients and visitors during tornadoes and other severe weather.

Lost Items
If you lose something, please notify your nurse immediately, and we will make every effort to help you find it. Unclaimed articles are turned in to the Environmental Services Department and are kept there for a limited time. To inquire about lost articles, call the Bothwell Regional Health Center Operator by dialing 0 in the hospital or call 660-826-8833 and ask for the Environmental Services Department. Bothwell Regional Health Center is not responsible for lost or damaged items.
Emergency Preparedness Program

Patient/Resident/Responsible Party Guide
This guide briefly explains the Emergency Preparedness Program in place at Bothwell Regional Health Center.

The Emergency Preparedness Program, which includes an Emergency Operations Plan, is a comprehensive approach to meeting the health and safety needs of our patient/resident population and provides our staff with guidance on how to respond to emergency situations that could impact the operation of the facility, such as natural or man-made disasters. This guide details expectations of residents and their families during an emergency event at the facility or a community disaster. The guide also provides families or responsible parties with alternate methods to contact the facility during a disaster when normal means of communications (telephones) may be inoperable.

Communications During a Disaster or Emergency Event
Staff members will communicate in person with residents when there is an emergency or disaster. Typically normal telephone communications will occur between the facility and resident family members or responsible parties when there is an emergency that impacts the operations of the facility. In the event of a disaster or other event that causes the loss of normal telephone communications, the facility may make alternate arrangements to contact resident families or responsible parties through the use of cell phones or other means.

If telephone communications (normal and cell) are inoperable the facility may share information relative to the status of the facility or disaster on its webpage at https://www.brhc.org. The facility may contact the news media (radio and TV) and issue a news release relative to the facility status or other relevant information.

About Our Emergency Operations Plan
The Emergency Operations Plan is a detailed plan containing emergency procedures (reviewed and revised on an annual basis) that the staff follows for various emergencies. Staff is trained each year on the Emergency Operations Plan and on Fire Procedures. Fire drills are conducted on a regular basis at varying times to ensure the fire alarm system is operational and to evaluate staff response upon alarm activation. Disaster drills are conducted twice per year to evaluate staff knowledge, response and competence.

How We Address Disasters
Establishing Incident Command
The leadership team will establish a Command Center for more serious incidents to provide guidance to staff and to communicate with emergency responders and agencies. Information and direction will be provided to residents and families as soon as possible. Please be patient. The safety of the residents and staff will take priority.

Sheltering in Place
In many incidents it may be safer to shelter in place, remaining in the building following the direction of staff. The facility maintains emergency supplies of food, water and other items in the building. When power is lost, an emergency generator will provide limited power to critical areas.

If Forced to Evacuate the Building
Evacuation of a healthcare facility is rare. However, the facility is prepared to do so if necessary for the safety of the residents.

The decision to evacuate all or part of the building comes from the Command Center depending on the disaster. Patients and families will be notified of the evacuation as soon as practical. Often, families may be able to take a patient home until the emergency is over. Staff are trained on how to evacuate patients using the elevators or, if necessary, the stairwells. If the facility is forced to relocate or evacuate patients, the release or sharing of patient information with other healthcare facilities and emergency agencies may be done as permitted by law.
Our Fire Procedures
Staff receives annual Fire Safety Training. This training includes:

- What to do if they discover a fire.
- How to rescue an individual from a room or area where there is a fire.
- How to use a fire extinguisher
- Evacuation of the fire area.

If you have any questions regarding this information, please contact the Patient Care Coordinator at 829-7770.

Infection Control
The health of our patients is our top concern, so we take all precautions recommended by regulatory and advisory agencies to protect our patients’ health through the control of infections. One of the best ways to keep our patients from acquiring an infection is also one of the simplest—washing hands. All your health-care team members should wash their hands before and after they provide your care. If you don’t see them do this, we encourage you to ask them. In addition to clean hands, staff will wear the necessary protective equipment, such as gloves, gowns and masks, when providing your care. In some cases, health-care staff may place you on precautions because of the risk of infection. Hospital staff may place a precautions sign on your room door, wear a mask or keep your door closed. Precautions may include the following:

**Airborne precautions:** You may be placed on airborne precautions if you have germs in your lungs or throat that can be harmful to others. These germs are spread to other people by tiny droplets sprayed from your mouth or nose that stay suspended in the air and can be breathed in by other people.

**Droplet precautions:** You may be placed on droplet precautions if you have germs in your lungs or throat that can be harmful to others. These germs are spread to other people by the droplets sprayed from your mouth or nose when you speak, sneeze or cough and can also be picked up when people touch the surfaces around you.

**Contact precautions:** You may be placed on contact precautions because you have germs in or on your body that can be more difficult to treat and harmful if they infect others. These germs are spread when people touch you or your environment, or when you touch others.

**Airborne/acid fast bacilli precautions:** You may be placed on airborne/AFB precautions because you have tuberculosis germs in your lungs that can be harmful to others. These germs are spread to other people by tiny droplets from your mouth or nose that stay suspended in the air and can be breathed in by other people. Hospital staff may place a precautions sign on your room door, wear special masks, keep your door closed, limit guests and have you wear a mask if you leave your room.

**Clostridium difficile:** C diff is an organism that often lives normally in the gut without causing problems. However, in people whose normal gut function has been disrupted or who have taken certain antibiotics, the organism can get out of control and produce a toxin that causes mild to severe diarrhea. The organism is “shed” during bouts of diarrhea and can contaminate the environment and be spread to other people. Staff will put a precautions sign on the door, wear gloves and gowns when entering the room, use soap and water instead of hand foam, and will clean the frequently touched surfaces in your room each day.
Medications

All medications you take while in the hospital are prescribed by your physician, dispensed by the hospital’s pharmacy and administered by a nurse. Patients are not permitted to use their own drugs or administer their own drugs (with the exception of special equipment furnished by the hospital that administers pain medicine following surgery), or to keep personal medications at their bedside. For your safety, your health-care team will use a bedside medication verification system to ensure you receive the right medication in the right dose at the right time.

During the admission or pre-admission process, you will be asked for a listing of your medications and the dosages, as well as the pharmacy where you have your medications filled, should any questions arise. Please bring this list with you. Be sure to include on this list any herbal medications, sample medications received from your doctor and any over-the-counter medicines you take. If you bring your medications with you to the hospital, we ask that they be taken home by a family member shortly after the nurse or physician has reviewed your medications.

Help Avoid Mistakes with Your Medicines

Who is responsible for your medicines?

A lot of people—including you!

- Doctors check all of your medicines to make sure they are OK to take together. They will also check your vitamins, herbs, diet supplements or natural remedies.
- Pharmacists will check your new medicines to see if there are other medicines, foods or drinks you should not take with your new medicines. This helps to avoid a bad reaction.
- Nurses and other caregivers may prepare medicines or give them to you.
- You need to give your doctors, pharmacists and other caregivers a list of your medicines.

This list should have your prescription medicines, over-the-counter medicines (for example, aspirin), vitamins, herbs, diet supplements, natural remedies, amount of alcohol you drink each day or week, and recreational drugs.

What should you know about your medicines?

- Make sure you can read the handwriting on the prescription. If you can’t read it, the pharmacist may not be able to read it either. You can ask to have the prescription printed.
- Read the label. Make sure it has your name on it and the right medicine name.
- Make sure that you understand all of the instructions for your medicines.
- If you have doubts about a medicine, ask your doctor, pharmacist or caregiver about it.

What if you forget the instructions for taking a medicine or are not sure about taking it?

Call your doctor or pharmacist. Don’t be afraid to ask questions about any of your medicines.

What can you do at the hospital or clinic to help avoid mistakes with your medicines?

- Make sure your doctors, nurses and other caregivers check your wristband and ask your name and date of birth before giving you medicine.
- Don’t be afraid to tell a caregiver if you think you are about to get the wrong medicine.
- Know what time you should get a medicine. If you don’t get it then, speak up.
- Tell your caregiver if you don’t feel well after taking a medicine. Ask for help immediately if you think you are having a side effect or reaction.
- You may be given IV (intravenous) fluids. Read the bag to find out what is in it. Ask the caregiver how long it should take for the liquid to run out. Tell the caregiver if it’s dripping too fast or too slow.
- Get a list of your medicines—including your new ones. Read the list carefully. Make sure it lists everything you are taking. If you’re not well enough to do this, ask a friend or relative to help.
Questions to ask your doctor or pharmacist

- How will this new medicine help you?
- Are there other names for this medicine? For example, does it have a brand or generic name?
- Is there any written information about the medicine?
- Can you take this medicine with your allergy? Remind your doctor about your allergies and reactions you have had to medicines.
- Is it safe to take this medicine with your other medicines? Is it safe to take it with your vitamins, herbs and supplements?
- Are there any side effects of the medicine? For example, upset stomach. Who can you call if you have side effects or a bad reaction? Can they be reached 24 hours a day, seven days a week?
- Are there specific instructions for your medicines? For example, are there any foods or drinks you should avoid while taking it?
- Can you stop taking the medicine as soon as you feel better? Or do you need to take it until it's gone?
- Do you need to swallow or chew the medicine? Can you cut or crush it if you need to?
- Is it safe to drink alcohol with the medicine?

The goal of the Speak Up™ program is to help patients become more informed and involved in their health care.

S.P.E.A.K. U.P. about your care

Speak up if you have questions or concerns. As a patient, you can make your care safer by being an active, involved and informed member of your health-care team. The "Speak Up™" program, sponsored by The Joint Commission, offers guidelines on how you can help make health care a good experience. Research shows that patients who take part in decisions about their own health care are more likely to get better faster.

To help prevent health-care mistakes, speak up if you have questions or concerns. If you still don’t understand, ask again. It’s your body, and you have a right to know.

- Your health is very important. Do not worry about being embarrassed if you don’t understand something that your doctor, nurse or other health-care professional tells you. If you don’t understand because you speak another language, we offer an interpreter who speaks your language. You have the right to get free help from someone who speaks your language.
- Don’t be afraid to ask about safety. If you’re having surgery, ask the doctor to mark the area that is to be operated on.
- Don’t be afraid to tell the nurse or the doctor if you think you are about to get the wrong medicine.

Pay attention to the care you are receiving.

- Always make sure you’re getting the right treatments and medicines by the right health-care professionals. Don’t assume anything. Tell your nurse or doctor if something doesn’t seem right. Expect health-care workers to introduce themselves. Look for their identification (ID) badges.
- Notice whether your caregivers have washed their hands. Hand washing is the most important way to prevent infections. Don’t be afraid to remind a doctor or nurse to do this.
- Know what time of the day you normally get medicine. If you don’t get it, tell your nurse or doctor.
- Make sure your nurse or doctor checks your ID. Make sure they check your wristband and ask your name before giving you your medicine or treatment. Educate yourself about your illness.
Educate yourself about your illness. Learn about the medical tests you get and your treatment plan.

- Write down important facts your doctor tells you. Ask your doctor if he or she has any written information you can keep.
- Read all medical forms and make sure you understand them before you sign anything. If you don’t understand, ask your doctor or nurse to explain them.

Ask a trusted family member or friend to be your advocate (advisor or supporter). Your advocate can ask questions that you may not think about when you are stressed.

- Ask this person to stay with you, even overnight, when you are hospitalized. Your advocate can help make sure you get the right medicines and treatments.
- Your advocate can also help remember answers to questions you have asked. He or she can speak up for you when you cannot speak up for yourself.
- Make sure this person understands the kind of care you want. Make sure they know what you want done about life support and other life-saving efforts.
- Go over the consents for treatment with your advocate before you sign them. Make sure you both understand exactly what you are about to agree to.
- Make sure your advocate understands the type of care you will need when you get home.

Know what medicines you take and why you take them. Medicine errors are the most common health-care mistakes.

- Ask why you should take the medication. Also ask about the side effects of all medicines.
- If you do not recognize a medicine, double-check that it is for you.
- If you are given an IV, read the contents of the bags of intravenous (IV) fluids. Ask the nurse how long it should take for the liquid to run out. Tell the nurse if it doesn’t seem to be dripping right.
- Whenever you get a new medicine, tell your doctors and nurses about allergies you have, or negative reactions you have had to other medicines.
- If you are taking a lot of medicines, be sure to ask your doctor or pharmacist if it is safe to take those medicines together. Do the same thing with vitamins, herbs and over-the-counter drugs.
- Carry an up-to-date list of the medicines you are taking in your purse or wallet.

Use a hospital, clinic or surgery center that has been carefully evaluated. The Joint Commission visits hospitals to see if they are meeting quality standards.

- Ask about the health-care organization’s experience in taking care of people with your type of illness. How often do they perform the procedure you need? What special care do they provide to help patients get well?
- Before you leave the hospital or other facility, ask about follow-up care and make sure that you understand all of the instructions.

Participate in all decisions about your treatment. You are the center of the health-care team.

- You and your doctor should agree on exactly what will be done during each step of your care.
- Know who will be taking care of you. Know how long the treatment will last.
- Don’t be afraid to ask for a second opinion. If you are unsure about the best treatment for your illness, talk with one or two additional doctors.

Bedside Reporting

We encourage patients and their families to be active participants in their care. Through the use of bedside reporting, we are able to offer patients full access and knowledge of their care and make them a full partner in their health-care decisions.
Visitor Information

Because visitors can be good medicine for patients, family members and friends are welcome to visit. However, patient care is our primary concern at Bothwell Regional Health Center, and to enhance the quality of care, specific visiting hours and guidelines have been established. Visiting hours and regulations for the unit you are visiting are listed below and are available at the Information Desk on the First Floor. Please follow these guidelines. If you need additional information, please check with your nurse after admission.

Visiting Guidelines

Here are some general guidelines for visitors at Bothwell Regional Health Center:

- The Bothwell Regional Health Center campus is smoke and tobacco-free, both inside and out. Our smoke and tobacco-free policy also prohibits the use of imitation smoking devices. Our policy is intended to create a healthier environment for everyone who comes here to receive care, visit a friend or family member, or work. Thank you for your cooperation.
- The number of visitors a patient has in his/her room should be based on the patient’s condition. However, the patient’s status needs to be taken into account when visitors consider the length of their visits.
- People with colds, sore throats or any contagious diseases should not visit for fear of infecting patients.
- Visitors should assist in maintaining a quiet environment in the hospital and avoid unnecessary noise.
- Visitors may be asked to leave the room during tests, treatments or when the doctor or nurse needs to see the patient. This is to protect our patients’ privacy.
- Some situations are not appropriate for bringing children to the hospital. Please attend to your children if they come to the hospital as visitors and note that Bothwell Regional Health Center cannot provide child-care services for visitors.

General Medical Units/Progressive Care Unit — 8 a.m. to 8:30 p.m.

Women’s Health Care Center — 8 a.m. to 8:30 p.m. However the father or significant other is welcome to visit at other times.

Labor and Delivery – Children must be at least 12 years old to visit in Labor and Delivery. We request only three visitors at a time, but you may take turns with as many people as the mother wishes. A maximum of three people may accompany mothers for delivery.

Pediatrics – There are no restrictions on visiting hours in this area for parents, grandparents, ministers and teachers. Brothers and sisters of the patient are encouraged to visit at the discretion of the charge nurse.

Critical Care Unit – Our Critical Care Unit has open visiting hours. We ask that families use the phone in the Critical Care Unit waiting room to call in prior to coming into the unit. This provides patient privacy for both your family member and other patients. We reserve the right to limit visitors when necessary, based on the patient’s condition.

Skilled Nursing Unit – The Skilled Nursing Unit has open visiting hours.

After Hours

Visitors must check in with security when entering the hospital after hours. Please note that the front door of the hospital closes at 9:30 each evening. After this time, the only open entrance to the hospital is through the Emergency Department entrance on the north side of the hospital. To help visitors and patients navigate their way through the hospital, signage is located on the ceilings, walls and by the elevators. If you become lost or would like directions to your desired location, please ask a member of the Bothwell Regional Health Center staff, who will be happy to take you to your destination.

Family and Visitor Lounges

At Bothwell Regional Health Center there are specially designated lounge areas for visitors on each patient floor and on the First Floor in the lobby. Specific family areas have been designated for families of patients in the Critical Care and Progressive Care Units, the Emergency Department, Surgery, Short Stay Unit and Women’s Health. From 6 a.m. to 2 p.m., a volunteer is on duty in the Surgery Waiting Area to assist family members.
Patient and Visitor Services

Accommodations
For your convenience, information on finding lodging, restaurants and other business establishments in Sedalia can be found at the Information Desk in the Main Lobby.

ATM Service
An automated teller machine is located on the First Floor by the Gift Shop. It is available 24 hours a day, seven days a week.

Case Management
An admission to the hospital is often accompanied by feelings of confusion and being overwhelmed. “What will happen to me after I am discharged?” “How will I pay for this hospitalization?” “Who can help me?” Case Management is a department comprised of nurses and social workers available to help answer some of the questions that come with being hospitalized. Office hours are 8 a.m. to 4:30 p.m., Monday through Friday. Please ask your nurse if you would like to consult with someone from Case Management.

Chaplain Services/Chapel
Chaplain services are available for hospital patients, family and hospital staff. If you would like to talk with a chaplain, please ask a member of the hospital staff, and you will be put in contact with a chaplain. A chapel is available near the main elevators on the First Floor for patient and visitor use. The chapel is open during visiting hours but is locked after hours. Please let a staff member know if the chapel is needed after regular visiting hours.

Educational Services
Bothwell Regional Health Center is committed to the quality of your life and offers a wide variety of classes, programs and support groups to help you get well and stay healthy. For more information about these services, please visit our website at www.brhc.org.

Health-Care Personnel
During your stay, you may be visited by other health-care professionals, including laboratory personnel, respiratory therapists, radiology technologists and physical, occupational or speech therapists. These employees can be clearly identified by their Bothwell Regional Health Center name badges bearing their photos.

Hospital Maps
A hospital map is provided on the inside cover of this booklet. Also, feel free to ask any Bothwell Regional Health Center staff member for directions, and he or she will be happy to take you to your destination.

Interpreters
Bothwell Regional Health Center offers interpretive services via video by specially trained staff. If an interpretive device or services are needed, please notify your admissions representative or contact your nurse.

Newspapers
A copy of The Sedalia Democrat newspaper is delivered daily to each patient room, courtesy of generous sponsors.

Parking
Parking for patients and visitors is available in all parking lots. Parking is available 24 hours a day, seven days a week. All parking at Bothwell Regional Health Center is free. Patients and Visitors are cautioned not to park in reserved areas or designated areas. Please be sure to lock your car.

Vending Machines
Vending machines offering a variety of food, sandwiches, snacks and beverages are available 24 hours a day. They are located along the hallway to the cafeteria on the Ground Floor and on the First Floor near the Critical Care Unit waiting room. You will also find vending machines located in the Progressive Care Unit Reception Area on the Second Floor. Please contact the Dietetics Department at extension 9561 if you experience problems with our vending machines.
Wi-Fi
As part of our services to patients and their families, Bothwell provides wireless access throughout the hospital so that you can access the Internet. This system may block content deemed to be inappropriate to hospital standards and is not intended for file sharing or large file downloads. Some applications or protocols may not work on the wireless network. Wired connections are available in the Progressive Care Unit (PCU) patient rooms and 2 North -- Short Stay Unit rooms. They can be identified by their yellow network jacks, and are labeled “Y-##” (## being a number). Instructions for use can be obtained from the nurse’s station in these units.

Bothwell Regional Health Center Cafeteria
The Bothwell Café is open daily from 7:30 a.m. to 6:30 p.m. and is located on the Ground Floor near the public elevators. Guests and visitors are welcome to free coffee and tea in the patient care units and in the Bothwell Café. Receipts for food purchases are available upon request.

Guest Meals
Visitors and patient families wanting to eat with the patient may obtain a guest meal ticket for a nominal cost. These tickets are available in the Registration Department. You should give the special meal ticket to the ward clerk at the nursing desk, and arrangements will be made to have a guest tray sent to the patient’s room.

Food Gifts for Patients
Visitors should check with the nurse before bringing gifts of food or drink to patients. On the Critical Care or Progressive Care units, please check with the unit nurse regarding any gifts for patients.

Patient Concerns
Bothwell Regional Health Center focuses on providing exceptional care. You and your family are encouraged to immediately let hospital staff and your physician know if you have any concerns regarding your care. You can rest assured that expressing complaints/issues or grievances will not compromise your care or future access to health care. We value your observations and comments because they help us to continuously improve the care and services we provide.

Your Patient Advocate
At Bothwell Regional Health Center, we want to do our best to make sure your visit is as comfortable as possible. However, we realize from time to time patients or their families may have questions, concerns or comments to share with our staff. Our patient advocate works to clear up questions or concerns, investigate and follow up on those issues, as well as pass along compliments.

Most patient concerns can be handled by Bothwell Regional Health Center staff as they occur. Our staff is encouraged to promptly resolve these concerns to the best of their ability. If additional assistance is needed, the patient advocate serves as a liaison among the patient, their family and the hospital. The patient advocate transcends departmental lines and interacts with staff at all levels of the organization.

If you need to address a concern or problem that interferes with your care or pass along a compliment, please call or ask your nurse to contact the patient advocate. The patient advocate can be reached at ext. 9588. From outside the hospital, you may call 660-827-9588. The patient advocate is available from 6:30 a.m. to 3 p.m. Monday through Friday and will fully investigate all concerns as soon as they are received. If the patient advocate is not available, please ask to speak to the health center’s patient care coordinator. A patient care coordinator is available and on duty 24 hours a day, seven days a week.

Patient Grievance Process
A patient grievance is a formal written or verbal complaint filed by a patient that cannot be resolved promptly by hospital staff present. Please be assured that exercising your right to the grievance process will not compromise patient care. Confidentiality will be respected at all levels of the process. If your concerns remain unresolved, you may also notify the patient advocate in writing of your grievance. The address is Patient Advocate, Bothwell Regional Health Center, 601 East 14th Street, Sedalia, MO 65301. We ask that you provide us with a detailed account of your concern and please include your name, address, and telephone number so that a response can be returned to you. The patient advocate
will contact you upon receiving your grievance and will fully investigate the complaint. The health center will provide you a written response detailing the steps taken within two weeks upon receipt of your grievance. A patient, their family or loved ones also may file a grievance with any state agency, regardless of whether they have first pursued a grievance with the hospital. A list of state advocacy agencies and contact information is provided below for your convenience:

**Resource Numbers**
- Bureau of Health Facility Regulation, P.O. Box 570, Jefferson City, MO 65102-0570, 573-751-6303
- Missouri Medicaid Recipient Service Unit, Division of Medical Services Recipient Services Unit, P.O. Box 6500, Jefferson City, MO 65102, 800-392-2161
- Center for Medicare & Medicaid Services, 601 East 12th, Kansas City, MO 64106, 800-633-4227
- State Board of Healing Arts, P.O. Box 4, Jefferson City, MO 65102, 573-751-0098

**Professional Review Organizations:**
- To file a complaint about a health facility with the State of Missouri certification organization:
  - Missouri Department of Health and Senior Services, Bureau of Health Facility Regulation, P.O. Box 570, Jefferson City, MO 65102-0570, 573-751-6303, 573-751-6400, 800-392-0210
- To file a complaint on quality of care or premature discharge:
  - Kepro, the Missouri quality improvement organization for Medicare beneficiaries, 1-855-408-8557
- To file a complaint with the accreditation agency:
  - The Joint Commission on Accreditation of Healthcare Organizations, One Renaissance Blvd., Oakbrook Terrace, IL 60181, 800-994-6610, www.jcaho.org

**Patient Education for Pain Management**

**A Helpful Guide to Pain Control**
This information is designed to help you understand your rights and responsibilities regarding pain and its treatment based on a plan of care.

Patients have the right to:

- Information and answers to questions about pain and pain relief.
- A feeling that staff cares about the patient’s pain.
- A quick response from staff when patients report pain.
- The most appropriate and available pain relief treatments.
- The services of a pain specialist, if needed.
- A sense that a complaint of pain is believed by the staff.

**What is Pain?**
It is feelings of hurt or discomfort. Pain can range from dull aches to sharp, stabbing sensations.

- Pain is physical. Disease, injury and infection cause much of the tissue and nerve damage responsible for pain.
- It is emotional. Factors such as stress, anxiety, trauma and depression can play a role in a person’s suffering.
- No two people are the same. Two patients with the same injury (or surgery) can experience very different levels of pain.
- Some pain has no clear physical cause. But it’s no less real for the person who is suffering.
**There Are Two Basic Types of Pain**

Acute pain is pain that is relatively short lived.
- Goes away after treatment and healing.
- May recur periodically over a lifetime (as with migraine headaches, for example).

Chronic pain is pain that lasts beyond the normal time for healing.
- Continuous pain related to a serious injury (severe burns, for example) or a disease such as cancer.
- Pain that results from unknown causes.
- Chronic, non-malignant pain resulting from non-life-threatening conditions such as arthritis and lower back pain.
- Neuropathic pain caused from damage to the nerves.

A person can have both acute and chronic pain at the same time.

**Why Pain Relief is Important for Recovery**

Pain prevention and management that occur before, during and after surgery and medical procedures can yield both short- and long-term benefits. Methods are available that make pain relief to acceptable levels a realistic goal in the majority of circumstances.

**Pain Management is a Team Effort**

Physicians, nurses, physical therapists, occupational therapists and even patients are a part of the team. Patients and families are encouraged to get involved in every step along the way.

**Pain management is: Initial assessment of the pain.**

Patients may be asked:
- Where does it hurt?
- How long have you had the pain?
- Does the pain go anywhere else?
- What started the pain?
- When did the pain start?
- How has the pain progressed?

*How bad the pain is (severity) will be assessed using one of the following two scales for acute pain:*

<table>
<thead>
<tr>
<th>0</th>
<th>1–3</th>
<th>4–6</th>
<th>7–9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSENT</td>
<td>MILD</td>
<td>MODERATE PAIN</td>
<td>SEVERE</td>
<td>WORST POSSIBLE PAIN</td>
</tr>
</tbody>
</table>

- 0 on the NUMBER SCALE is no pain and 10 is the worst possible pain with the numbers in between indicating mild, moderate, severe and very severe pain.
0 on the FACE SCALE is no pain and 10 is the worst possible pain with the faces in between indicating mild, moderate, severe and very severe pain.

Patients unable to use numeric or face scales and patients with chronic pain will be assessed by changes in vital signs, behavior, facial expression, body movement and vocalizations (crying, whimpering, groaning).

- What makes the pain worse?
- What makes the pain better?
- What other symptoms do you have with the pain?

Reassessment of the pain will occur at regular intervals based on the patient's plan of care.

Medical Management of Pain
- Medical management of pain may include oral medication, non-narcotic and narcotics; IV medication including patient-controlled devices; epidurals; as well as newer agents and therapies specific to different types of acute, chronic, chronic nonmalignant and neuropathic pain.
- Relaxation and behavioral methods (guided imagery, for example)
- Emotional support
- Exercise (approved by doctor)
- Physical agents (massage, heat and cold, etc.)

Patients also have certain responsibilities regarding pain management:
- Ask the physician or nurse about what to expect.
- Ask for pain relief as soon as the pain begins.
- Discuss different kinds of pain relief choices with the health-care provider.
- Work with the health-care team to make a pain relief plan and goal.
- Help physicians and nurses measure your pain.
- Tell the physician or nurse about any pain that won’t go away.

Discharge and Pain Management:
- Patients will be evaluated for pain control/relief.
- Patients will be assisted in making pain management goals for comfort and/or functional ability.
- Patients will be provided with written instructions for follow-up to maintain/improve pain management goals.
Crisis Intervention

The Access Crisis Intervention (ACI) line is staffed by mental health professionals who can respond to your crisis 24 hours a day and 7 days a week. They will talk with you about your crisis and help you determine what further help is needed. This may include a telephone conversation to provide understanding and support, a face-to-face intervention, an appointment the next day with a mental health professional or perhaps an alternative service that best meets your needs. They may give you other resources or services within your community to provide you with ongoing care following your crisis. All calls are strictly confidential.

Contact numbers for additional counties can be found at https://dmh.mo.gov/mentalillness/progs/acimap.html

Your Rights and Responsibilities as a Patient

The Patient Bill of Rights

At Bothwell Regional Health Center, quality patient care is our primary concern. By outlining these rights and responsibilities, we hope to improve the level of care, treatment and outcomes. Your individual rights are:

- To choose a designated support person or representative to participate in the development and implementation in the inpatient or outpatient treatment care plan, pain management plan and discharge planning.
- To be informed of and involved in decisions regarding proposed and ongoing care/services.
- To refuse services in accordance with law and regulation.
- To access, request amendment to and receive an accounting of disclosures or health information.
- To choose whether or not to participate in research or clinical trials.
- To receive effective communication about services being provided.
- To have complaints heard, reviewed and, if possible, resolved.
- To file a complaint with the state authority.
- To have assurance of confidentiality of information, privacy and security.
- To receive appropriate assessment and management of pain.
- To be free from mental, physical, sexual and verbal abuse, neglect and exploitation.
- To address end-of-life decisions.
- Access to care and treatment within the mission and capability of this hospital regardless of race, age, color, national origin, religion, sex, sexual orientation, gender identity, disability, diagnosis or source of payment.
• Choose your visitors, regardless of whether the visitor is a family member, a spouse, a domestic partner or friend, as well as your right to withdraw such consent to visitation at any time and the right for a “support person” to be identified who can also make the visitation decisions. The hospital respects the patient’s rights that visitation privileges will not be restricted, limited or denied on the basis of race, color, national origin, religion, sex, sexual orientation, gender identity, disability, diagnosis or source of payment.

Patient Responsibilities
The patient, caregivers and family have the responsibility:
• To provide complete and accurate information about current complaints, past illnesses, hospitalizations, medications and other matters relating to the patient’s health.
• To report unexpected changes in the patient’s condition.
• To provide feedback about service needs and expectations.
• To ask questions about care or services.
• To follow instructions. The patient, caregiver and family should express any concerns they have about their ability to follow and comply with the proposed care plan.
• To understand and accept consequences for the outcomes if they do not follow the care plan.
• To follow the organization’s policies and procedures concerning patient care and conduct.
• To show respect and consideration of the organization’s personnel and property.
• To promptly meet any financial obligation agreed to with the organization.

A patient’s rights and responsibilities are taken very seriously at Bothwell Regional Health Center. If you have questions or concerns regarding these requirements, contact our Patient Advocate by one of the means outlined in “Patient Concerns” on page 17.

Activating Rapid Response Team
If you are worried that you or a loved one is experiencing a medical emergency, please do not hesitate to notify a staff member. A team of specially trained intensive care nurses and respiratory therapists are available to respond quickly to evaluate the patient in need of emergency attention. You may also dial “0” and ask the hospital operator for assistance.

Financial Services
Billing/Insurance
As a patient, you should familiarize yourself with the terms of your insurance coverage. Patient Accounting Representatives are available to answer questions about your hospital bill and to help you understand our financial policy and billing procedures. Patient Accounting may be reached by calling 660-826-8833 and following the prompts. (Direct lines for questions are listed on the top of Page 23.)

Bothwell Regional Health Center’s Responsibilities
Bothwell Regional Health Center will submit a claim to your insurance company(s) and cooperate to the fullest in expediting their processing of your claim. We will provide to them, as necessary, any additional information they may request in a timely manner. However, you should remember that your insurance policy is a contract between you and your insurance company, and you have the final responsibility for payment of your hospital bill. Bothwell Regional Health Center also offers financial counseling and may help find resources to assist you with part or all of your self-pay balances. The financial counselor can be reached from 8 a.m. to 4:30 p.m. Monday through Friday by calling 660-827-9417.

If you have questions concerning your bill and are covered by health insurance, you may call the appropriate representative based on the first letter of your last name: A – D 660-827-9435  E – K 660-827-9463  L – R 660-827-9461  S – Z 660-827-9408
If you are self-pay, you may call the following: A – L 660-827-9458  M – Z 660-829-8854  Spanish 660-829-7759
Financial Assistance Policy
The Bothwell Regional Health Center Financial Assistance Policy exists to provide eligible patients or other responsible parties partially or fully discounted emergency or medically necessary care. Patients or financially responsible parties who are seeking financial assistance must apply through an application process.

Eligible Services: Emergency and/or medically necessary healthcare services provided by Bothwell Regional Health Center and associated primary care clinics.

Eligible Patients: Patients receiving eligible services, who submit a completed financial assistance application (including related documentation and information), and who are determined eligible for financial assistance by Bothwell Regional Health Center’s Director of Patient Financial Services.

How to Apply: Financial assistance applications may be obtained, completed or submitted as follows:
- Obtain an application at any Bothwell Regional Health Center facility registration desk.
- Request to have an application mailed to you or if you have any questions, call (660) 827-9417.
- Request an application by mail at 601 East 14th Street, Sedalia MO 65301.
- Download an application through the Bothwell Regional Health Center website at brhc.org.

Determination of Financial Assistance Eligibility
Generally, patients are eligible for financial assistance based on their insurance status and income level. Uninsured patients with a family income of 138 percent of federal poverty level or less may be eligible for a discount up to 100 percent. Patients with income under 138 percent of the federal poverty level may be eligible for a discount from 5 percent to 100 percent.

Eligible patients will not be charged for emergency or other medically necessary care, more than the Amount Generally Billed, based on Medicaid fee-for-service and commercial insurance rates.

If you have any questions please call and speak with a patient representative at Bothwell Regional Health Center at, 660-827-9417.

Credit and Collection Policy
Bothwell Regional Health Center will bill all third-party insurers, including but not limited to Medicare, Medicaid, Tricare, Blue Cross, Workers Compensation carriers and other group or individual insurance carriers. Although Bothwell Regional Health Center will bill third-party insurers, it is our intent that the bill will remain the responsibility of the patient receiving the services or the individual who is legally responsible for the patient.

Medicare patients must present the proper Medicare numbers upon admission to the hospital. The patient’s portion will be billed to them upon receipt of payment from Medicare for any applicable deductible and coinsurance that is not covered by third-party liability.

Patients having hospitalization insurance are requested to assign benefits to the hospital. Information on hospitalization insurance should be presented upon admission. All insurance coverage is verified and certified through either the employer or direct with the insurance company as to benefits payable. An estimated difference of what the insurance pays and charges made may be due on dismissal.

Patients without insurance will be contacted during an inpatient admission by a patient representative, unless arrangements have been made prior to the admission. Maternity patients and elective surgical procedures (BTL-LTS-vasectomy-dental) are expected to be paid in full on dismissal or substantial payment on dismissal with full balance paid within 60 days (unless prior arrangements have been made). If a patient is determined to be indigent after the account is reviewed, a charity adjustment could be made. Applications for assistance can be obtained from any patient representative in the Business Office at 660-827-9417.

For financial assistance programs governed by the Missouri Division of Family Services, such as Medicaid and the various MC Plus plans, the patients should present the hospital a current insurance card at the time of admission. If the information is not available at that time, the patient or parent should provide the information at the first opportunity, or they may be responsible for charges.
When admitted to Bothwell Regional Health Center, you are assigned a patient representative. Their responsibility, as a non-medical employee of the hospital, is to help you with any problems or concerns of a non-medical nature that may arise concerning your account during your hospital stay. Bothwell Regional Health Center will post and bill all appropriate charges and credits. All patients will be charged the same rate for services. Bothwell Regional Health Center will comply with all local, state and federal regulations in recording contractual adjustments and billing the patient for appropriate covered and non-covered charges, coinsurance and/or deductibles. After reasonable billing and documented efforts have been expended, all unpaid balances on accounts will be referred to an outside collection agency for collection. The cost of collection including court cost, attorney fees and all other costs incurred in the collection process will be added to the original account balance.

**Physician Billing**
Charges that appear on your bill are for services provided by Bothwell Regional Health Center. You may receive a separate bill from your physician and any other physicians or professional specialists who provided services ordered by your physician. Any questions concerning these bills should be directed to the phone number listed on the bill.

**What You Can Do To Prevent Falls at Home**

1. **Begin a regular exercise program.** Exercise is one of the most important ways to lower your chances of falling. It makes you stronger and helps you feel better. Exercises that improve balance and coordination (like Tai Chi) are the most helpful.
   Lack of exercise leads to weakness and increases your chances of falling.
   Ask your doctor or health-care provider about the best type of exercise program for you.

2. **Have your health care provider review your medicines.** Have your doctor or pharmacist review all the medicines you take, even over-the-counter medicines. As you get older, the way medicines work in your body can change. Some medicines or combinations of medicines can make you sleepy or dizzy and can cause you to fall.

3. **Have your vision checked.** Have your eyes checked by an eye doctor at least once a year. You may be wearing the wrong glasses or have a condition like glaucoma or cataracts that limits your vision. Poor vision can increase your chances of falling.

4. **Make your home safer.** About half of all falls happen at home. To make your home safer:
   - Remove things you can trip over (like papers, books, clothes, and shoes) from stairs and places where you walk.
   - Remove small throw rugs or use double-sided tape to keep the rugs from slipping.
   - Keep items you use often in cabinets you can reach easily without using a step stool.
   - Have grab bars put in next to your toilet and in the tub or shower.
   - Use non-slip mats in the bathtub and on shower floors.
   - Improve the lighting in your home. As you get older, you need brighter lights to see well.
   - Hang light-weight curtains or shades to reduce glare.
   - Have handrails and lights put in on all staircases.
   - Wear shoes both inside and outside the house. Avoid going barefoot or wearing slippers.
Smoking Cessation Guide

At Bothwell Regional Health Center, we understand that nicotine is a very addictive drug. We also know that it can be very difficult to suddenly not be able to smoke when you are a patient/visitor in the hospital. While we realize that you may be counting the time until you can smoke again, please think about hospitalization as an opportunity to quit using tobacco. Bothwell Regional Health Center is committed to helping you through your periods of smoking urges, enabling you to become a non-smoker and improving your health.

Tips for Becoming a Non-smoker

The first few days are the hardest as nicotine clears from your system. Here are a few tips for stopping the habit:

- Practice taking deep breaths.
- Drink plenty of water if your diet is non-restrictive.
- Nibble on a low-calorie snack if your diet is non-restrictive. (Please ask your nurse for extra snacks.)
- Stay busy with other activities.
- Ask to speak to a smoking cessation facilitator.
- Ask us about nicotine replacement therapy.
- Make a list of reasons why you want to be a non-smoker and read it often.
- Have a friend or family member clean out your vehicle, ashtrays and other favorite smoking paraphernalia while you are in the health center. This will help you fight the urge when you go home.
- THINK POSITIVE! Picture yourself as a successful non-smoker!

Additional Resources

Contact these organizations for more information to help you to be a non-smoker:

- American Heart Association, 573-446-3000, www.americanheart.org
- National Cancer Institute, 800-4-CANCER (442-6237), www.cancer.gov
- Bothwell Regional Health Center, www.brhc.org

For pregnancy related information:

When You are Discharged

When your doctor decides you are ready to leave the hospital, a discharge order will be written. You may want to make arrangements with a family member or friend to help you when it’s time to go home. Your doctor and our clinical staff will give you instructions about post-hospital care. If you have questions about your diet, activities, your need for follow-up care or other matters, please be sure to ask us for more information. After you’ve been home a few days, our dedicated staff may call you to ensure there are no further needs and to answer any questions you may have.

Discharge & Dismissal

Once your physician has approved your dismissal, the nursing staff will finalize your discharge plans. It may take two hours for you to complete your discharge process. Please inform your family or friends so transportation can be arranged.

Personal Belongings

Collect all of your belongings and double check closets and drawers. If you have anything stored in the hospital safe, please call Registration at ext. 400 and a member of the staff will bring your belongings to you. You can also pick up your items from the hospital safe as you leave the health center.

Medications

Your physician may give you new prescriptions for your medications as you go home, or send a prescription electronically to your pharmacy. It is important for you to have your discharge medications filled at your home pharmacy. This helps to expedite the discharge process and to ensure that your home pharmacy has your complete medication profile.

Home Health, Hospice and Durable Medical Equipment

A list of agencies that provide services to this area can be provided by your case manager or social worker.