



# Michigan Endoscopy Center



## Patient

### **INFORMATION**

*Instructions for your  
Endoscopic Procedure*

1a

## ***Prior to your Procedure***

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*Leave all jewelry and valuables at home.*

*This does not mean your insurance card or your eyeglasses. The Endoscopy Center cannot take responsibility for safeguarding your personal items.*

*Make arrangements for someone to drive you home.*

*Your escort will need to be available to hear the discharge instructions and accompany you home. **Escorts are required to stay at the Endoscopy Center so that they will be available during your discharge process.** Please limit the number of people accompanying you to one person. Your escort will be allowed in the recovery room with you.*

*Please make arrangements for childcare in advance.*

*The Endoscopy Center reception area and recovery room area are not designed to accommodate small children.*

*If you have any questions regarding your medication prior to the procedure, please contact your physician's office.*

2a

## **Day of your Procedure**

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*Please check in at the reception desk  
60 minutes before your procedure is scheduled to  
begin.*

*Bring all insurance cards.*

*Bring your medication(s) or list of the  
medication(s) and dosages you are currently  
taking.*

*It is very important for us to know if you have  
any allergies; especially an allergy to rubber  
(latex).*

*If you have sleep apnea and use a C-PAP  
machine, please bring it with you if you are  
scheduled for a colonoscopy.*

<b>Patient Name</b>	
_____	
<b>You are scheduled for a procedure</b>	
_____	
<small>Procedure name</small>	
<b>With</b>	
_____	
<small>Doctor's name</small>	
<b>On</b>	
_____	
<small>Date</small>	
<small>Check-in time</small>	<small>Procedure Time</small>

## **After your Procedure**

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*Average Recovery Time  
is 30-45 minutes for most procedures.*

*Your escort will need to come into  
the recovery room to listen to your  
discharge instructions, sign the written  
instructions and escort you home.*

*We would prefer your driver to stay  
in the immediate area during your  
procedure.*

*There is a pharmacy in the building  
with convenience foods, soft drinks and  
newspapers. Because your stay is rela-  
tively brief, it is important that your  
escort stay in the reception area once  
your procedure begins.*

*It would be best if someone could  
stay with you at home or check on you  
following your procedure.*

*Patients will remain in the  
recovery area until they are ready for  
discharge.*

*You may not take a bus or taxi home.*

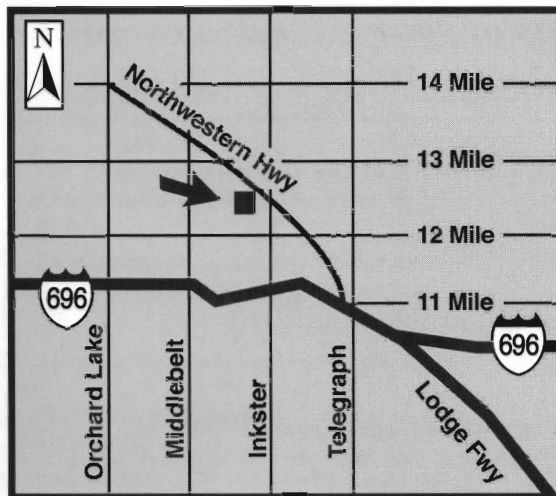
If you would like to discuss any aspect of  
your care, please contact the Administrator  
at : 248-865-6555



**Michigan Endoscopy Center**  
30055 Northwestern Highway  
Suite L-60  
Farmington Hills, MI 48334

Phone: (248) 865-6555  
Fax: (248) 865-6554  
[www.endoctr.com](http://www.endoctr.com)

## How to find us



Michigan Endoscopy Center is located in the Providence Medical Center at the Southwest corner of Northwestern Hwy and Inkster Roads between 12 and 13 Mile Roads.

From the North - Telegraph Road south to 13 Mile Road. Turn west on 13 Mile to Inkster Road. Turn south onto Inkster Road and travel past Northwestern Highway and turn west (right) into the first driveway south of Northwestern Highway.

From the South - Telegraph Road north to 12 Mile Road. Turn west onto 12 Mile Road to Inkster Road. Turn north onto Inkster Road and travel approximately 1/2 mile and turn west (left) into the parking lot entrance located on Inkster Road just south of Northwestern Highway.

From the East - Take I-696 to Telegraph Road north to 12 Mile Road. Turn west onto 12 Mile Road to Inkster Road. Turn north onto Inkster Road and travel approximately 1/2 mile and turn west (left) into the parking lot just south of Northwestern Highway.

From the West - Take I-696 to Orchard Lake Road. Turn north onto Orchard Lake Road to 12 Mile Road. Turn east onto 12 Mile Road and take that to Inkster Road. Turn north onto Inkster Road and travel approximately 1/2 mile and turn west (left) into the parking lot entrance located on Inkster Road just south of Northwestern Highway.

Once parked, go to the West Entrance. Go through the double glass doors to the West Elevator. Take the elevator to the "LL" level. As you exit the elevator, go to the right. Follow the signs to L-60. Make a right at the first corridor. The Center is located on the right side.



### Michigan Endoscopy Center

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Suite L-60  
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### Welcome

Michigan Endoscopy Center is pleased to welcome you as a patient at our facility. We are a non-hospital based outpatient center dedicated to providing the highest quality endoscopic services in a comfortable atmosphere.

Our staff wants to make your visit as pleasant as possible. The center is a place where patients receive quality care and then return to the comfort of their homes the very same day. Respect for individual needs is a concern of ours and by completing the questionnaire given to you at the end of your stay, you will give us valuable feedback regarding your experience.

You will find the atmosphere at Michigan Endoscopy Center more personalized than a traditional hospital environment. In this reassuring setting, you will receive individual attention from a caring and highly skilled staff of doctors and nurses.

The Following physicians own and / or practice at Michigan Endoscopy Center:

*David Benkoff, MD*  
*Alan Cutler, MD*  
*Mark DeVore, MD*  
*Janice Fields, MD*  
*Phillip Goldmeier, MD*  
*Julia Greer, MD*  
*Randall Jacobs, MD*  
*Jean Jaffke, MD*  
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**Patient Name:**

**You are scheduled for a procedure:**

Procedure:

Date:                      Check-in time:

Doctor's name:

Doctor's Office Number:

## Patient **INFORMATION**

*Additional information and forms can be found at:*  
***www.endoctr.com***

### Patient Rights Notification

Each patient at the Center will be notified of his/her patient rights verbally and in writing in advance of their surgery. A posted notice will also be made available in the waiting room. Patient rights include, but are not limited to:

- Treated with respect, consideration and dignity.
- Exercise these rights without regard to gender, race, cultural, economic, educational or religious background and without fear of discrimination or reprisal.
- To receive care in a safe setting that is free of physical or psychological threats.
- Access communication aids. (Interpreters, etc.)
- Expect that any architectural barriers identified will be addressed when feasible.
- Be free of restraint except when indicated to protect the patient or others from injury.
- Have his/her questions, concerns or complaints addressed in good faith.
- Expect continuity of care. The patient will not be discharged or transferred without prior notice, except in the case of a medical emergency.
- Provisions for after-hour and emergency care.
- Access necessary surgical and/or procedural interventions that are medically indicated.
- Obtain any information patient needs to give.
- Give informed consent before any treatment or procedure.
- Be provided, to the degree known, complete & timely information concerning their diagnosis, evaluation, treatment & prognosis. When it is medically inadvisable to give such information to a patient, the information is provided to a person designated by the patient or legally authorized person.
- Make choices and decisions regarding his/her medical care to the extent permitted by law-this includes the right to refuse treatment.
- Have his/her disclosures and records treated confidentially, and given the opportunity to approve or refuse its release, except when release is required by law.
- Receive, on request, a copy of his/her medical record.
- Know the services available at the Center.
- Know the facility fees for services.

- Request an itemized statement of all services provided to them through the facility, along with the right to be informed of the payment methodology utilized. At his/her own expense, to consult with another physician or specialist if other qualified physicians are requested and available.
- Be informed of patient conduct & responsibilities rules.
- Refuse to participate in experimental research.
- Know the identity, professional status, institutional affiliation and credentials of health care professionals providing their care, and be assured that these individuals have been appropriately credentialed.
- Be informed of their right to change their provider if other qualified providers are available.
- Be provided with appropriate information regarding absence of malpractice insurance coverage.

### ***Patient Responsibilities***

The care a patient receives depends partially on the patient. Therefore, in addition to these rights, a patient has certain responsibilities that are presented to the patient in the spirit of mutual trust and respect. Patient responsibilities include:

- Provide complete and accurate information to the best of his/her ability about his/her health, medications, including dietary supplements and any allergies or sensitivities.
- Make it known whether he/she clearly comprehends the course of his/her medical treatment and what is expected of him/her.
- Follow the treatment plan prescribed by his/her physician.
- Keep appointments and notify Center or physician when unable to do so.
- Provide a responsible adult to transport him/her home from the facility.
- To be respectful of all the health care providers and staff, as well as other patients and escort(s).
- Adhering to Center rules for his/her protection and the protection of others.
- Financial obligation for payment of services.
- Inform the Center about any living will, medical power of attorney, or other directive.

### ***Advance Directive***

In accordance with Michigan law, this Center must inform you that we are not required to honor and do not honor DNR directives. A healthcare power of attorney will be honored.

If a patient should provide his/her advance directive a copy will be placed on the patient's medical record and transferred with the patient should a hospital transfer be ordered by his/her physician.

At all times the patient or his/her representative will be able to obtain any information they need to give informed consent before any treatment or procedure.

In order to assure that the community is served at this facility, information concerning advanced directive is available at the Center. If you do not agree with the Center's policy, and upon your request, we will assist you in rescheduling your procedure.

### ***Patient Grievances***

The patient and family are encouraged to help the facility improve its understanding of the patient's environment by providing feedback, suggestions, comments and/or complaints regarding the service needs and expectations.

A complaint or grievance should be registered by contacting the Center and/or a patient advocate at the Michigan Department of Health and/or Medicare. The Center will respond in writing with notice of how the grievance/complaint has been addressed:

The Michigan Endoscopy Center  
30055 Northwestern Highway, Suite L60  
Farmington Hills, MI 48334  
Attention: Brien Fausone, Administrator  
(248) 865-6555  
bfausone@endoctr.com

Michigan Department of Health  
Bureau of Health Profession  
Health Regulatory Division  
P.O. Box 30670  
Lansing, MI 48909  
(517) 373-9196  
[www.michigan.gov/healthlicense](http://www.michigan.gov/healthlicense)

Medicare Beneficiary Ombudsman  
1-800-MEDICARE (1-800-633-4227)  
[www.medicare.gov/ombudsman.asp](http://www.medicare.gov/ombudsman.asp)



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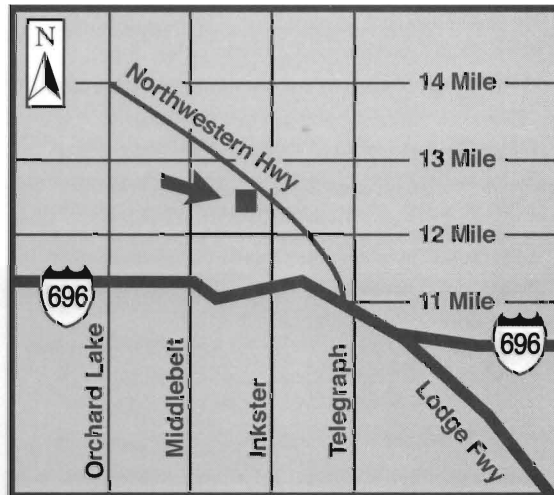
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