

HELPFUL PHONE NUMBERS

- Cardiology (913) 541-5996
- Centralized Scheduling (913) 541-5062
- Diabetes Center (913) 541-3297
- Emergency Services (913) 541-5338
- Financial Counselor (913) 541-5321
- Human Motion Institute (913) 541-5500
- One Day Surgery (913) 541-5382
- Outpatient Rehabilitation (913) 541-5001
- Patient Accounts (866) 209-9019
- Physician Referral (913) 541-7400
- Pre-admission Testing (913) 541-5258
- Prenatal Community Education (913) 438-4773
- Radiology (913) 541-5385
- Sleep Disorders Center (913) 390-7064
- The Women's Center (913) 541-5300



10500 Quivira Road
Overland Park, Kansas 66215
Hospital Information (913) 541-5000
www.oprmc.com

This facility, its programs and activities are accessible to and usable by disabled persons, including persons with impaired hearing and vision.

Overland Park Regional Medical Center PATIENT GUIDE



INDEX

Welcome	1
Maps.....	2
Patient Rights and Responsibilities.....	8
Notice of Privacy Practices.....	13
Advance Directives.....	18
Speak Up to Prevent Healthcare Errors	22
Preventing Infection	25
Understanding Price and Payment.....	27
Fall Prevention	30
You Can Quit Smoking.....	31
Helpful Phone Numbers.....	39

PATIENT INFORMATION PASSCODE

We are committed to providing quality care that is sensitive, compassionate, promptly delivered, and cost effective, as reflected in the HCA Commitment to Our Patients. The privacy of patient information is second only in importance to patient care itself. In order to better protect your privacy, we are assigning a four-digit passcode for you to give to the family members and friends whom you would like us to share your personal health information.

The family member or friend seeking information will need to provide this passcode to the nurse or other hospital employee that they are speaking with, in order to receive any information other than general condition. This passcode will serve as your authorization to disclose your personal health information for purposes such as communicating results, findings, and care decisions to family members and friends.

The facility is not responsible for the distribution of this passcode and will assume that the patient is taking reasonable measures to protect the passcode given.

YOUR PATIENT PASSCODE IS:

If you have any questions regarding your privacy as a patient, please contact the facility privacy official at (913) 541-6000.

WELCOME

Welcome to Overland Park Regional Medical Center. Whether you're coming here as a patient or visitor, we want you to be comfortable and well informed. This booklet will provide you with general information about our hospital as well as important patient and visitor information. If you have any questions, please ask any staff member for assistance.

ABOUT OUR HOSPITAL

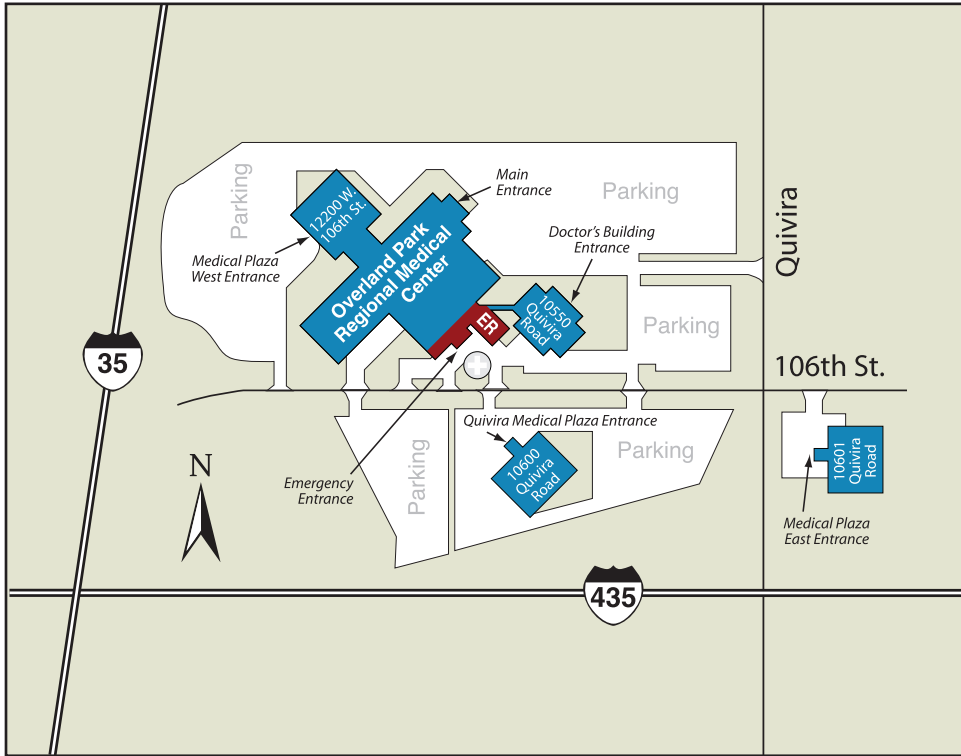
Overland Park Regional Medical Center has been serving the healthcare needs of Johnson County and the surrounding counties since December of 1978. The hospital is a licensed 343-bed facility offering acute medical care services to our patients. The hospital campus features four medical office buildings, two pharmacies and the offices of more than 100 physicians.

SERVICES THAT SET US APART

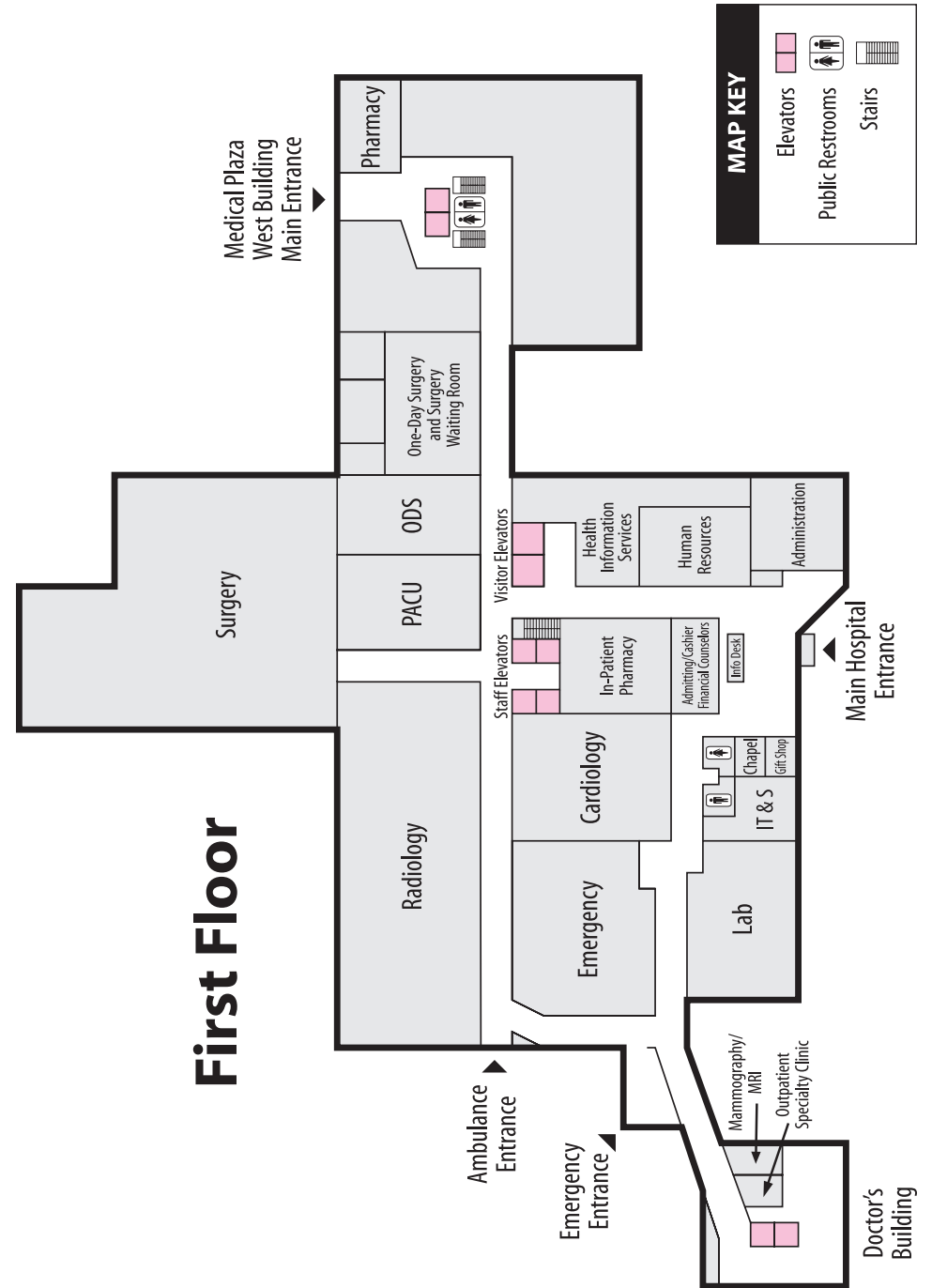
- 24-hour emergency services with a verified Level II Trauma Center
- Accredited Cycle II Chest Pain Center with PCI (Percutaneous Coronary Intervention)
- Median “door to balloon” time for ST Elevated MI patients consistently under the national goal of 90 minutes and the national average of 142 minutes.
- Complete women’s healthcare through The Women’s Center including obstetrics, gynecology, cardiology and urogynecology; plus comprehensive high-risk obstetric services in infertility, perinatology, maternal-fetal surgery and neonatology
- Level III B Neonatal Intensive Care Unit – the highest level of care available in Johnson County for premature or sick infants
- Extensive Certified Nurse Midwife program offered through physician offices
- The Human Motion Institute for comprehensive services addressing injuries and conditions of bones, joints and muscles
- Diabetes Center with ADA stamp of approval
- Community education seminars offered each month; topics include maternity, women’s health, orthopedic and safety

MAPS

CAMPUS MAP

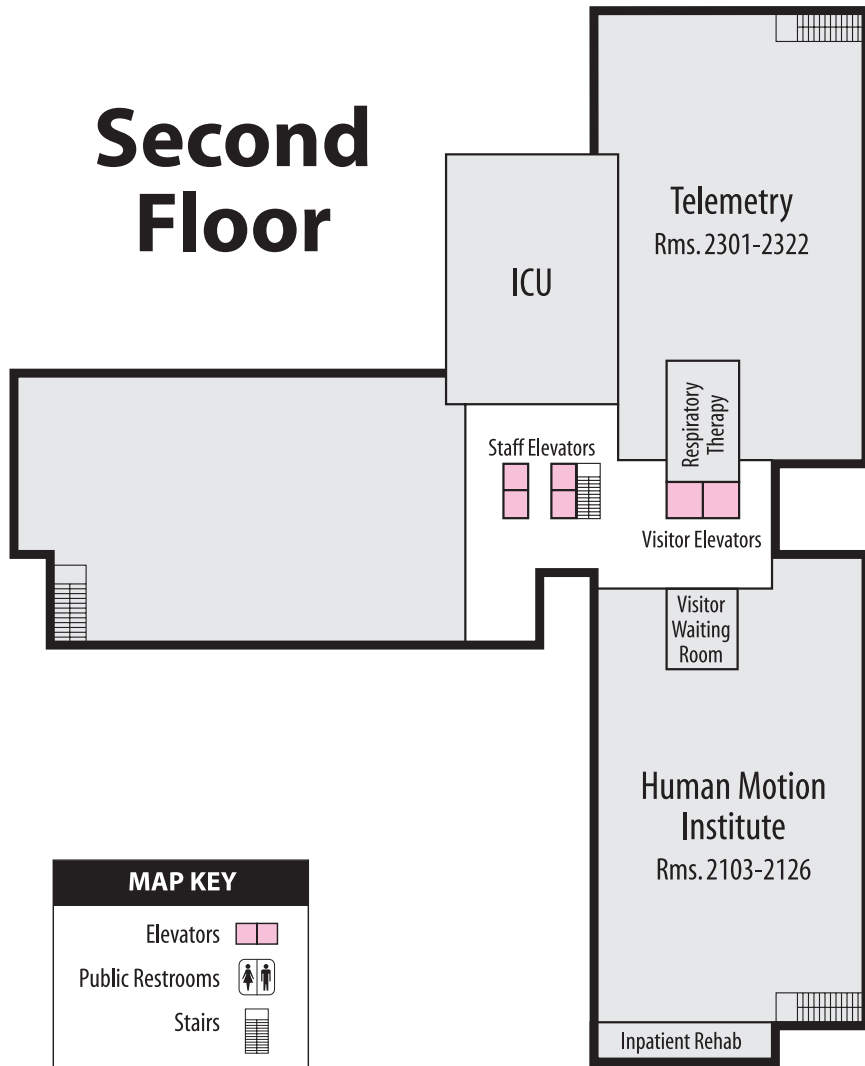


FIRST FLOOR



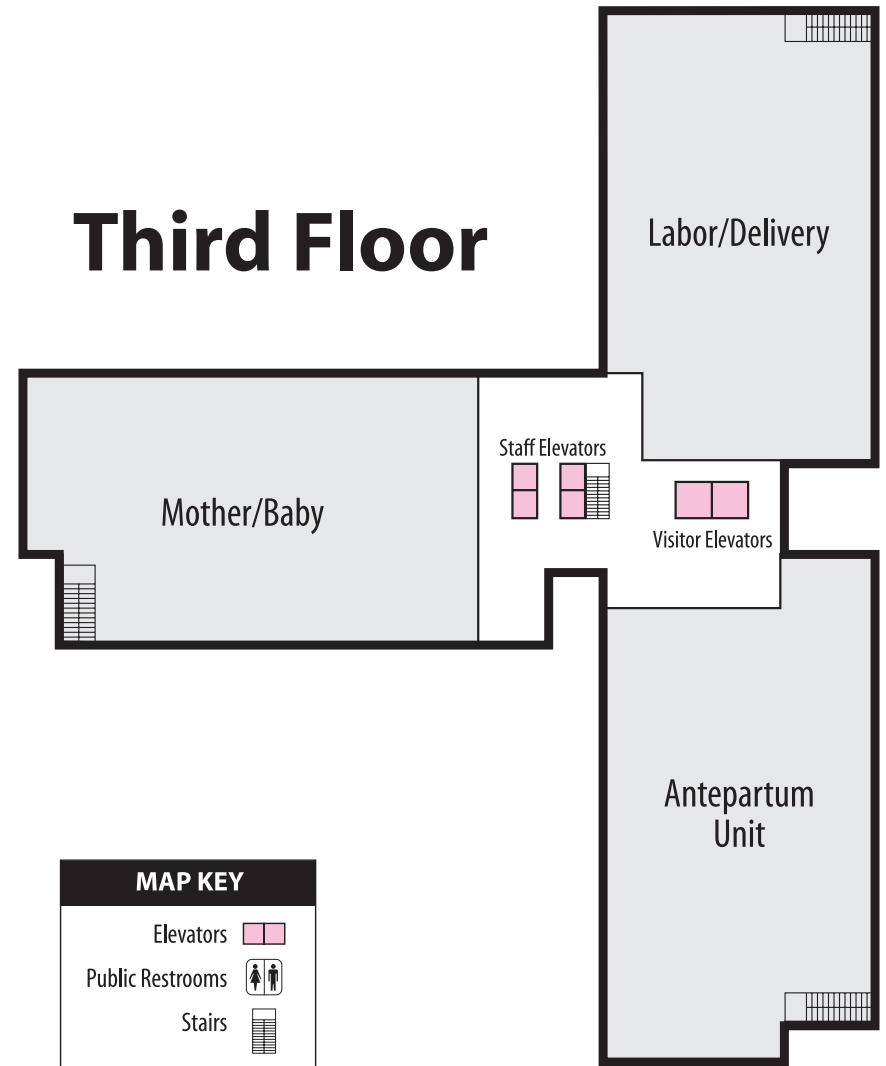
SECOND FLOOR

Second Floor



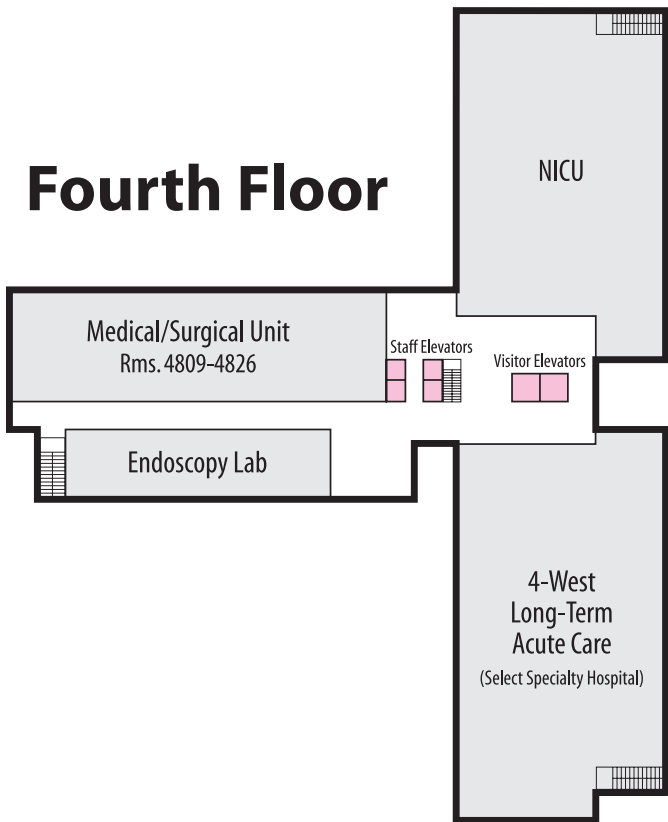
THIRD FLOOR

Third Floor

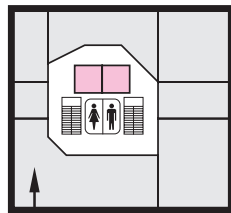


FOURTH FLOOR

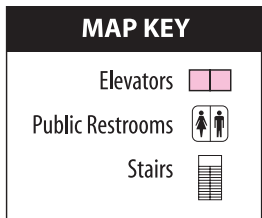
Fourth Floor



Medical Plaza West Building
(access through first floor, lower level, or outside west entrance)

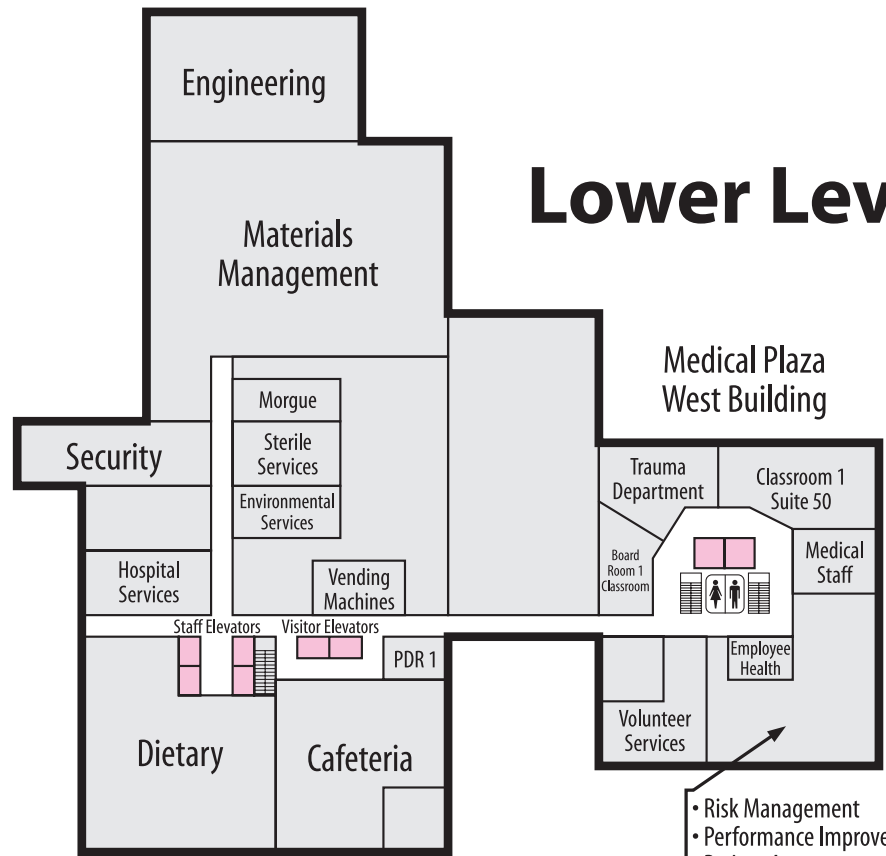


- Outpatient Rehab
- Occupational Therapy
- Physical Therapy
- Speech Therapy
- Hand Rehab
- Human Motion Institute
- Physician Clinics

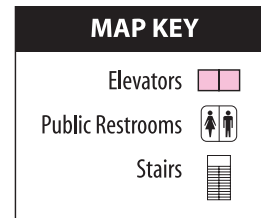


LOWER LEVEL

Lower Level



- Risk Management
- Performance Improvement
- Patient Access
- Chaplain
- Continuum of Care
- Infection Control



PATIENT RIGHTS AND RESPONSIBILITIES

YOUR LEGAL RIGHTS REGARDING HEALTHCARE DECISIONS

Adults who have capacity and have been informed as to the nature of their illness and the treatment options have the right to consent or refuse any healthcare treatment. This includes the right to forgo treatment or to have treatment withdrawn after it is started. This right extends to any medical treatment or procedure including surgery, respirators, antibiotics, cardiac resuscitation, diagnostic tests and tube feedings.

If you decide to refuse treatments you believe are more of a burden than a benefit, your doctors and nurses will continue to provide you comfort and care. Such choices can be made by telling a physician your wishes regarding your healthcare treatment. However, it is also suggested that you write out your wishes in case you are unable to communicate them later. This process of writing down your wishes for future treatment can be accomplished by completing an advance directive. There are several types of advance directive documents: a living will, a health care treatment directive (HCTD) and a durable power of attorney for health care (DPAHC).

If you already have an advance directive, please let your nurse and physician know immediately. It is critical that you discuss any healthcare directives with your family and health care providers.

LIVING WILLS

A living will is a written, signed, dated and witnessed document that allows individuals to state that they do not want death-prolonging procedures performed. Living Wills are effective only if you have a terminal condition, will die in a short time, and are unable to communicate your wishes.

HEALTH CARE TREATMENT DIRECTIVES

A health care treatment directive is a statement of your wishes to be used if you are unable to speak for yourself. You may request that any procedure prolonging the dying process be withheld or withdrawn or any procedure be provided. Treatments that relieve pain and suffering are never discontinued.

Health care treatment directives are effective when you are no longer able to communicate your wishes. Even if you are not terminally ill, you may request through a health care treatment directive that treatment be withdrawn or withheld should it be unlikely to help you to recover an acceptable quality of life. You may also request that treatments be provided. Examples of such non-terminal conditions might include an overwhelming illness or injury in which recovery is not likely, a comatose condition such as with some severe strokes, or the final stages of a dementing illness such as Alzheimer's.

DURABLE POWER OF ATTORNEY FOR HEALTHCARE (DPAHC)

The DPAHC provides you with the right to name an individual as an agent to make healthcare decisions for you should you ever be in a situation where you are no longer able to make your own decisions. You may choose anyone whom you trust to speak for you to assist your healthcare providers in determining which treatment options you would have chosen for yourself.

In Missouri the DPAHC must be notarized; however in Kansas it may be either witnessed by two individuals or notarized.

ADDITIONAL INFORMATION

You may revoke a health care treatment directive, living will or a durable power of attorney at any time. If you wish to revoke or modify one of these documents, please notify your physician or nurse. You may contact your nurse, physician, social worker, patient representative or chaplain to receive further information and instructions on advance directives. Forms are available for these advance directives which meet the requirement of Kansas and Missouri. Your attorney may also draft such documents for you.

This hospital, as a part of HCA Midwest Division, recognizes both state and federal laws that entitle patients to make personal healthcare treatment decisions. All patients will be provided an appropriate level of care whether or not they have put in writing their wishes about healthcare treatments. Advance directives assist us with providing you the care you believe to be appropriate to your situation.

ETHICS CONSULTATIONS

Each hospital must have a process to help with difficult ethical dilemmas; most hospitals have an Ethics Committee. The Ethics Committee serves those who need consultation, discussion, support or assistance in facing choices and resolving ethical conflicts. While an Ethics Committee cannot mandate any particular course of action, such as treatment or no treatment, it can make suggestions and help patients, family and providers explore various options.

Ethics Committees are "multi-disciplinary" consisting of physicians, nurses, a hospital administrator, representatives from the community, a minister, a social worker, and occasionally other individuals such as patient representatives, psychologists, attorneys, etc. Consultations with the Ethics Committee are informal and non-judgmental. There is no charge for this service.

If you want to request help with difficult choices or discuss ethical questions or issues with someone on the Ethics Committee, please contact your nurse. A member of the Ethics Committee or the hospital staff will contact you, and if a full consultation is appropriate and available, the Ethics Committee will meet with you. The patient/family and possibly others involved in the care will be invited. We believe that through open and honest discussion in a non-judgmental atmosphere, ethical concerns affecting the care of the patient can be satisfactorily resolved.

PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

We believe that our mutual respect for rights and responsibilities will contribute to an improved outcome and greater satisfaction with your care.

You or your representatives have the RIGHT to:

1. Treatment, care, and services within the hospital's capacity and mission, and in compliance with law and regulation.
2. Considerate and respectful care.
3. Be free from all forms of abuse or harassment.
4. Have a family member or representative of your choice and your physician notified promptly of your admission to the hospital.
5. Obtain complete information about your diagnosis, plan of treatment and prognosis from your physician in terms that you can understand.
6. Participate in the development and implementation of your plan of care.
7. Receive from your physician the information needed for you to give your permission for any procedure or treatment.
8. Refuse treatment as permitted by law and to be told what might happen because of your decision.
9. Formulate an advance directive.
10. Have cultural, psychosocial, spiritual, and personal values, beliefs, and preferences respected.
11. Pastoral and other spiritual services.
12. Consult with the hospital Ethics Committee on ethical issues surrounding your case.
13. Have, as required by state and federal laws, all activities, conversations, and records related to your medical care kept confidential.
14. Access information contained in your clinical records within a reasonable time frame.
15. Privacy.
16. Refuse to see anyone not officially connected with your care.
17. Wear clothing and other symbolic items as long as they do not interfere with your care.
18. Be free from restraints or seclusion that are not medically necessary or used as a means of coercion, discipline, staff convenience, or retaliation.
19. Request a room change if you are dissatisfied.
20. A reasonably safe environment.
21. Know the name and professional status of your caregiver.
22. Have visitors, make phone calls and receive mail.
23. Obtain, at your expense, another physician's opinion about your care.
24. Receive an explanation of your bill.
25. Know what hospital rules apply to your conduct as a patient.
26. Reasonable response to your requests.
27. Assessment and control to the extent possible of your pain.
28. Freely voice concerns or complaints about any aspect of your care without being subject to coercion, discrimination, reprisal or unreasonable interruption of care. Complaints may be filed through the hospital's grievance policy and/or with the state Department of Health.

We further recognize that the personal relationships between physician, patient and hospital staff are important for the best medical care. Indeed these are your partners in a healthcare team. As part of this team, we expect you to assume the following responsibilities.

You or your representatives are responsible for:

1. Giving complete information about your medical history and the medications you are taking.
2. Letting us know when you do not understand instructions.
3. Letting your physician or nurse know of changes in your health.
4. Letting us know your needs.
5. Cooperating with the staff and other patients by following guidelines that have been explained.
6. Accepting the consequences of not following instructions.
7. Respecting the rights of other patients (e.g., regarding visiting, noise, language).
8. Showing respect for hospital property and staff.
9. Your hospital bill and giving information needed to file an insurance claim.
10. Telling the nursing staff when you have personal valuables with you. The hospital cannot be responsible for items not placed in the hospital safe.
11. Following your treatment plan.
12. Providing a copy of your advance directive, should you have one.

We believe that your highest satisfaction will be achieved if you and all members of the healthcare team are aware of your rights and responsibilities.

If you have concerns regarding any of the items discussed in this document or concerns regarding any aspect of your care, please contact your nurse, physician, patient representative, social worker or chaplain.

If your concerns are not resolved to your satisfaction, you have the right to ask for and receive information about outside agencies that may be able to help you. Please contact your nurse, the director of the unit, or a social worker to receive further information. If you feel your concerns are not being addressed you may contact the hospital liaison at 541-5644 or you may request to speak with hospital management. If your concerns cannot be resolved through the hospital, you may contact the Office of Quality Monitoring at The Joint Commission at 1-800-994-6610. You may also advise the Missouri Department of Health at 912 Wildwood, Jefferson City, MO 65109 (573-751-6302), or the Kansas Department of Health and Environment at 1000 S.W. Jackson, Suite 330, Topeka, Kansas 66212 (Complaint Hotline: 1-800-842-0078) of your concerns.

NON-DISCRIMINATION ADMISSION POLICY

As a recipient of Federal financial assistance, Overland Park Regional Medical Center does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, creed, color, or national origin, or on the basis of disability or age, in admission to, or participation in the receipt of the services and benefits of any of its programs and activities. This non-discrimination policy

applies also to employment carried out by Overland Park Regional Medical Center directly or through a contractor or other entity with whom Overland Park Regional Medical Center arranges to carry out programs and activities.

This statement is in accordance with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Regulations of the U.S. Department of Health and Human Services issued pursuant to the Acts, Title 45 of Federal Regulations Part 80, 84 and 91. (Other Federal Laws and Regulations provide protection against discrimination on grounds of sex and creed.)

In case of questions concerning this policy, or in the event of a desire to file a complaint alleging violations of the above, please contact:

Overland Park Regional Medical Center
Patient Advocate
(913) 541-5644

To seek review by the Quality Improvement Organization regarding quality of care issues, coverage decisions, and to appeal a premature discharge contact the Kansas Foundation for Medical Care at 800-432-0770.

NOTICE OF PRIVACY PRACTICES

Effective Date: April 1, 2003

This section describes how health information about you may be used and disclosed and how you can get access to this information. Please review it carefully. If you have any questions about this notice, please contact the Facility Privacy Official by dialing the main hospital number.

NOTICE OF PRIVACY PRACTICES

Each time you visit a hospital, physician, or other healthcare provider, a record of your visit is made. Typically, this record contains your symptoms, examination and test results, diagnoses, treatment, a plan for future care or treatment, and billing-related information. This notice applies to all of the records of your care generated by the hospital, whether made by hospital personnel, agents of the hospital, or your personal doctor. Your personal doctor may have different policies or notices regarding the doctor's use and disclosure of your health information created in the doctor's office or clinic.

OUR RESPONSIBILITIES

We are required by law to maintain the privacy of your health information and provide you a description of our privacy practices. We will abide by the terms of this notice.

USES AND DISCLOSURES

How we may use and disclose Health Information about you.

The following categories describe examples of the way we use and disclose health information:

For Treatment: We may use health information about you to provide you treatment or services. We may disclose health information about you to doctors, nurses, technicians, medical students, or other hospital personnel who are involved in taking care of you at the hospital. For example: a doctor treating you for a broken leg may need to know if you have diabetes because diabetes may slow the healing process. Different departments of the hospital also may share health information about you in order to coordinate the different things you may need, such as prescriptions, lab work, meals, and x-rays.

We may also provide your physician or a subsequent healthcare provider with copies of various reports that should assist him or her in treating you once you're discharged from this hospital.

For Payment: We may use and disclose health information about your treatment and services to bill and collect payment from you, your insurance company or a third party payer. For example, we may need to give your insurance company information about your surgery so they will pay us or reimburse you for the treatment. We may also tell your health plan about treatment you are going to receive to determine whether your plan will cover it.

For Health Care Operations: Members of the medical staff and/or quality improvement team may use information in your health record to assess the care and outcomes in your case and others like it. The results will then be used to continually improve the quality of care for all patients we serve. For example, we may combine health information about many patients to evaluate the need for new services or treatment. We may disclose information to doctors, nurses, and other students for educational purposes. And we may combine health information we have with that of other hospitals to see where we can make improvements. We may remove information that identifies you from this set of health information to protect your privacy.

We may also use and disclose health information:

- To business associates we have contracted with to perform the agreed upon service and billing for it;
- To remind you that you have an appointment for medical care;
- To assess your satisfaction with our services;
- To tell you about possible treatment alternatives;
- To tell you about health-related benefits or services;
- To contact you as part of fundraising efforts;
- To inform Funeral Directors consistent with applicable law;
- For population based activities relating to improving health or reducing health care costs; and
- For conducting training programs or reviewing competence of health care professionals.
- When disclosing information, primarily appointment reminders and billing/collections efforts, we may leave messages on your answering machine/voice mail.

Business Associates: There are some services provided in our organization through contracts with business associates. Examples include physician services in the emergency department and radiology, certain laboratory tests, and a copy service we use when making copies of your health record. When these services are contracted, we may disclose your health information to our business associates so that they can perform the job we've asked them to do and bill you or your third-party payer for services rendered. To protect your health information, however, we require the business associate to appropriately safeguard your information.

Directory: We may include certain limited information about you in the hospital directory while you are a patient at the hospital. The information may include your name, location in the hospital, your general condition (e.g., good, fair) and your religious affiliation. This information may be provided to members of the clergy

and, except for religious affiliation, to other people who ask for you by name. If you would like to opt out of being in the facility directory please request the Opt Out Form from the admission staff or Facility Privacy Official.

Individuals Involved in Your Care or Payment for Your Care: We may release health information about you to a friend or family member who is involved in your medical care or who helps pay for your care. In addition, we may disclose health information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status and location.

Research: We may disclose information to researchers when an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information has approved their research and granted a waiver of the authorization requirement.

Future Communications: We may communicate to you via newsletters, mail outs or other means regarding treatment options, health related information, disease-management programs, wellness programs, or other community based initiatives or activities our facility is participating in.

Organized Health Care Arrangement: This facility and its medical staff members have organized and are presenting you this document as a joint notice. Information will be shared as necessary to carry out treatment, payment and health care operations. Physicians and caregivers may have access to protected health information in their offices to assist in reviewing past treatment as it may affect treatment at the time.

Affiliated Covered Entity: Protected health information will be made available to hospital personnel at local affiliated hospitals as necessary to carry out treatment, payment and health care operations. Caregivers at other facilities may have access to protected health information at their locations to assist in reviewing past treatment information as it may affect treatment at this time. Please contact the Facility Privacy Official for further information on the specific sites included in this affiliated covered entity.

As required by law, we may also use and disclose health information for the following types of entities, including but not limited to:

Food and Drug Administration

- Public Health or Legal Authorities charged with preventing or controlling disease, injury or disability
- Correctional Institutions
- Workers Compensation Agents
- Organ and Tissue Donation Organizations
- Military Command Authorities
- Health Oversight Agencies
- Funeral Directors, Coroners and Medical Directors
- National Security and Intelligence Agencies
- Protective Services for the President and Others

Law Enforcement/Legal Proceedings: We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

State-Specific Requirements: Many states have requirements for reporting including population-based activities relating to improving health or reducing health care costs. Some states have separate privacy laws that may apply additional legal requirements. If the state privacy laws are more stringent than federal privacy laws, the state law preempts the federal law. Your Health Information Rights Although your health record is the physical property of the healthcare practitioner or facility that compiled it, you have the Right to:

- **Inspect and Copy:** You have the right to inspect and obtain a copy of the health information that may be used to make decisions about your care. Usually, this includes medical and billing records, but does not include psychotherapy notes. We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to health information, you may request that the denial be reviewed. Another licensed health care professional chosen by the hospital will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.
- **Amend:** If you feel that health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for the hospital. We may deny your request for an amendment and if this occurs, you will be notified of the reason for the denial.
- **An Accounting of Disclosures:** You have the right to request an accounting of disclosures. This is a list of certain disclosures we make of your health information for purposes other than treatment, payment or health care operations where an authorization was not required.
- **Request Restrictions:** You have the right to request a restriction or limitation on the health information we use or disclose about you for treatment, payment or health care operations. You also have the right to request a limit on the health information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. For example, you could ask that we not use or disclose information about a surgery you had. We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment.
- **Request Confidential Communications:** You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you may ask that we contact you at work instead of your home. The facility will grant reasonable requests for confidential communications at alternative locations and/or via alternative means only if the request is submitted in writing and the written request includes a mailing address where the individual will receive bills for services rendered by the facility and related correspondence regarding payment for services. Please realize, we reserve the right to contact you by other means and at other locations if you fail to respond to any communication from us that requires a response. We will notify you in accordance with your original request prior to attempting to contact you by other means or at another location.

- **A Paper Copy of This Notice:** You have the right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are still entitled to a paper copy of this notice. If the facility has a website you may print or view a copy of the notice by clicking on the Notice of Privacy Practices link. To exercise any of your rights, please obtain the required forms from the Privacy Official and submit your request in writing.

CHANGES TO THIS NOTICE

We reserve the right to change this notice and the revised or changed notice will be effective for information we already have about you as well as any information we receive in the future. The current notice will be posted in the hospital and include the effective date. In addition, each time you register at or are admitted to the hospital for treatment or health care services as an inpatient or outpatient, we will offer you a copy of the current notice in effect.

COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with the hospital by following the process outlined in the facility's Patient Rights documentation. You may also file a complaint with the Secretary of the Department of Health and Human Services. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**

OTHER USES OF HEALTH INFORMATION

Other uses and disclosures of health information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose health information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose health information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the care that we provided to you.

ADVANCE DIRECTIVES

HERE'S HOW IT WORKS

1. You have the right to information about your medical condition, diagnosis, prognosis and possible treatments. You also have the right to refuse any treatment including life saving medical treatment.
2. Overland Park Regional Medical Center recognizes and supports the right of an adult with decision-making capabilities to:
Consent or to refuse consent to medical or surgical treatment.
Make advance directives concerning personal wishes if the adult should lose decision-making capacity.
Receive appropriate care whether or not the individual has executed an advance directive.
Be aware that patient rights are exercised within context of hospital policies and procedures which are guided by a fundamental belief in the dignity of all people, reverence for human life and compassionate care and sensitivity to human suffering.
3. A representative of the hospital will talk with you about your rights outlined above and your right to make advance directives. You also have the right not to make advance directives. That is your choice.
4. You may choose between a durable power of attorney for healthcare and a living will, or you may have both. The basic difference between the two is that the durable power of attorney for healthcare designates a particular person to make decisions for you when you are not able to decide for yourself and can cover all healthcare decisions. A living will states your wishes about withholding or withdrawing life-sustaining care.
5. If you choose to make advance directives, the hospital can provide the necessary forms for making a living will and/or assigning a durable power of attorney for healthcare. There are other form options provided in the Kansas statute that can be used and that are legal, including the forms developed by the agencies listed in this brochure. You do not need a lawyer in order to make an advance directive. However, legal advice is certainly appropriate.
6. To be effective, an advance directive in Missouri must be notarized; then witnesses are not necessary. In the event that you travel, both witnesses and notarization may be required in some other states; therefore, it is acceptable to obtain both witnesses and notarization of the advance directive.

7. If you make advance directives, you should discuss them with your physician. You are responsible for making copies available to him or her and all other doctors you deal with. You should also discuss and share copies of your advance directives with your family members. It is always a good idea to keep copies for yourself.
8. If you wish to change your mind about your advance directives at a later date, you may do so. You can revoke the old documents and make new advance directives that must also be witnessed and/or notarized. A living will may be revoked by destroying the document, signing a written revocation or by telling an adult that the document no longer expresses your wishes. For a verbal revocation to be effective, the adult who heard the verbal revocation must confirm in writing. This document must be given to the attending physician. A durable power of attorney for healthcare may be formally revoked in writing with a witness and/or notarized statement or otherwise destroyed.

THE PATIENT SELF-DETERMINATION ACT

The Patient Self-Determination Act is a federal law that requires hospitals to “provide written information” to adult inpatients concerning “an individual’s right under state law... to make decisions concerning... medical care, including the right to accept or refuse medical or surgical treatment and the right to formulate advance directives.” To help patients make these choices, Kansas law provides for advance directives. This brochure outlines what advance directives are and what Kansas statutes require.

ADVANCE DIRECTIVES

Advance directives document a patient’s choices about healthcare treatment. This includes decisions such as, refusing treatment, being placed on life-support, and stopping treatment at a point the patient chooses. It also includes requesting life-sustaining treatment if that is desired.

There are several kinds of advance directives. There are two that are mentioned most often. One is called a living will and the other is called a durable power of attorney for healthcare. Through advance directives, patients can make legally valid decisions about their medical treatment.

KANSAS LAW

Kansas statute and law recognize two types of living wills and a durable power of attorney for healthcare.

For these documents to be effective, they must be notarized and/or witnessed by two adults who are not related to the patient, who will not inherit from the patient signing the document, and are not financially responsible for the patient.

THE LIVING WILL

The most common type of living will that Kansas recognizes and that has a broader application is one that directs life prolonging procedures to be withheld or withdrawn when there is no hope of significant recovery due to: a terminal condition; a condition, disease, or injury with out reasonable expectation to regain an acceptable quality of life; or substantial brain damage or brain disease which can not be significantly reversed.

The person can define exactly what treatments or procedures they wish to have withdrawn or withheld if such treatment or procedures proves to be ineffective in regaining an acceptable quality of life.

The other type of living will is found in a statute titled “The Natural Death Act.” The statute allows any adult to sign a form (relating to themselves only), which states that life-sustaining procedures should be withheld or withdrawn when decision-making capacity is lost, and when such procedures would merely prolong the dying process. Medical procedures deemed necessary to provide comfort or alleviate pain are not considered “life-sustaining procedures” under this act.

For the Natural Death Act Declaration to be effective, two physicians must personally examine the patient and determine that the patient has a terminal illness. The physicians must agree that death will occur whether or not the medical procedure or intervention is done. The form is not effective if the patient is pregnant.

THE DURABLE POWER OF ATTORNEY FOR HEALTHCARE

A durable power of attorney for healthcare is a document in which a patient gives someone else the right to make decisions regarding their healthcare when the patient is no longer able. The person who would make the decisions is known as an “agent” and can be any adult except a physician or other healthcare provider (including people who work, own or care directors for hospitals and other healthcare institutions) unless the healthcare provider is related by blood or marriage to the person signing the document.

The powers, which can be granted include: given consent, refuse consent or withdraw consent for organ donation, autopsy or the treatment of any physical or mental condition. The agent may also make all necessary arrangements for hospitalization, physicians or other care, and to request and receive all information and records and to sign releases for records.

The person signing the durable power of attorney for healthcare can choose which of the above powers the agent will have. Specific instructions can be given. For example, a specific treatment may be prohibited. Requests for treatment, including life-sustaining care, can also be included. The special instructions allow the durable power of attorney for healthcare to be specific for each individual’s needs.

The agent and the healthcare providers must follow the patient’s expressed wishes. This means that they must also respect any wishes that are stated in a living will.

Unless limited, the durable power of attorney for healthcare allows the agent to make decisions about withholding or withdrawing life-sustaining treatment in all types of illnesses (including comas or persistent vegetative states) and is not limited to terminal illness.

If you should have further questions, would like some more information about advance directives, or would like to obtain the appropriate forms, please contact:

Overland Park Regional Medical Center
Social Services Department
(913) 541-5490

Midwest Bioethics Center, Inc.
410 Archibald
Kansas City, MO 64111
(816) 756-2713

Kansas City Metropolitan Bar Association
1125 Grand
Kansas City, MO 64106
(816) 474-4322

SPEAK UP TO PREVENT HEALTHCARE ERRORS

Everyone has a role in making health care safe — physicians, health care executives, nurses and technicians. Health care organizations across the country are working to make health care safety a priority. You, as the patient, can also play a vital role in making your care safe by becoming an active, involved and informed member of your health care team.

An Institute of Medicine (IOM) report has identified the occurrence of medical errors as a serious problem in the health care system. The IOM recommends, among other things, that a concerted effort be made to improve the public's awareness of the problem.

The “Speak Up” program, sponsored by the Joint Commission on Accreditation of Healthcare Organizations, urges patients to get involved in their care. Such efforts to increase consumer awareness and involvement are supported by the Centers for Medicare and Medicaid Services. This initiative provides simple advice on how you, as the patient, can make your care a positive experience. After all, research shows that patients who take part in decisions about their health care are more likely to have better outcomes.

Speak up if you have questions or concerns, and if you don't understand, ask again. It's your body and you have a right to know.

- Your health is too important to worry about being embarrassed if you don't understand something that your doctor, nurse or other health care professional tells you.
- Don't be afraid to ask about safety. If you're having surgery, for example, ask the doctor to mark the area that is to be operated upon, so that there's no confusion in the operating room.
- Don't be afraid to tell the nurse or the doctor if you think you are about to receive the wrong medication.
- Don't hesitate to tell the health care professional if you think he or she has confused you with another patient.

Pay attention to the care you are receiving. Make sure you're getting the right treatments and medications by the right health care professionals. Don't assume anything.

- Tell your nurse or doctor if something doesn't seem quite right.
- Expect health care workers to introduce the person to whom she is handing her baby. If you are unsure, ask.
- Notice whether your caregivers have washed their hands. Hand washing is the most important way to prevent the spread of infections. Don't be afraid to gently remind a doctor or nurse to do this.

- Know what time of day you normally receive a medication. If it doesn't happen, bring this to the attention of your nurse or doctor.
- Make sure your nurse or doctor confirms your identity, that is, checks your wristband or asks your name, before he or she administers any medication or treatment. Reduce themselves when they enter your room and look for their identification badges. A new mother, for example, should

Educate yourself about your diagnosis, the medical tests you are undergoing, and your treatment plan.

- Ask your doctor about the specialized training and experience that qualifies him or her to treat your illness (and be sure to ask the same questions of those physicians to whom he or she refers you).
- Gather information about your condition. Good sources include your doctor, your library, respected websites and support groups.
- Write down important facts your doctor tells you, so that you can look for additional information later. And ask your doctor if he or she has any written information you can keep.
- Thoroughly 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.
- Make sure you are familiar with the operation of any equipment that is being used in your care. If you will be using oxygen at home, do not smoke or allow anyone to smoke near you while oxygen is in use.

Ask a trusted family member or friend to be your advocate.

- Your advocate can ask questions that you may not think of while you are under stress.
- Ask this person to stay with you, even overnight, when you are hospitalized. You will be able to rest more comfortably and your advocate can help to make sure you get the right medications and treatments.
- Your advocate can also help remember answers to questions you have asked, and speak up for you if you cannot.
- Make sure this person understands your preferences for care and your wishes concerning resuscitation and life support.
- Review consents for treatment with your advocate before you sign them and make sure you both understand exactly what you are agreeing to.
- Make sure your advocate understands the type of care you will need when you get home. Your advocate should know what to look for if your condition is getting worse and whom to call for help.

Know what medications you take and why you take them. Medication errors are the most common health care mistakes.

- Ask about the purpose of the medication and ask for written information about it, including its brand and generic names. Also inquire about the side effects of the medication.
- If you do not recognize a medication, verify that it is for you. Ask about oral medications before swallowing, and read the contents of bags of intravenous (IV) fluids. If you're not well enough to do this, ask your advocate to do this.

- If you are given an IV, 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 properly (that it is too fast or too slow).
- Whenever you are going to receive a new medication, tell your doctors and nurses about allergies you have, or negative reactions you have had to medications in the past.
- If you are taking multiple medications, ask your doctor or pharmacist if it is safe to take those medications together. This holds true for vitamins, herbal supplements and over-the-counter drugs, too.
- Make sure you can read the handwriting on any prescriptions written by your doctor. If you can’t read it, the pharmacist may not be able to either.

Use a hospital, clinic, surgery center, or other type of health care organization that has undergone a rigorous on-site evaluation against established, state-of-the-art quality and safety standards, such as that provided by the Joint Commission.

- Ask about the health care organization’s experience in treating your type of illness. How frequently do they perform the procedure you need and what specialized care do they provide in helping patients get well?
- If you have more than one hospital or other facility to choose from, ask your doctor which one offers the best care for your condition.
- Before you leave the hospital or other facility, ask about follow-up care and make sure that you understand all of the instructions.
- Go to Quality Check at www.jcaho.org to find out whether your hospital or other health care organization is accredited.

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, how long the treatment will last, and how you should feel.
- Understand that more tests or medications may not always be better. Ask your doctor what a new test or medication is likely to achieve.
- Keep copies of your medical records from previous hospitalizations and share them with your health care team. This will give them a more complete picture of your health history.
- Don’t be afraid to seek a second opinion. If you are unsure about the nature of your illness and the best treatment, consult with one or two additional specialists. The more information you have about the options available to you, the more confident you will be in the decisions made.
- Ask to speak with others who have undergone the procedure you are considering. These individuals can help you prepare for the days and weeks ahead. They also can tell you what to expect and what worked best for them as they recovered.

PREVENTING INFECTION

Avoiding contagious diseases like the common cold, strep throat, and the flu is important to everyone. Here are five easy things you can do to fight the spread of infection.



1. CLEAN YOUR HANDS.

- Use soap and warm water. Rub your hands vigorously for at least 15 seconds. Rub your palms, fingernails, in between your fingers, and the backs of your hands.
- Or, if your hands do not look dirty, clean them with alcohol-based hand sanitizers. Rub the sanitizer all over your hands, especially under your nails and between your fingers, until your hands are dry.
- Clean your hands before touching or eating food. Clean them after you use the bathroom, take out the trash, change a diaper, visit someone who is ill, handle money or play with a pet.



2. MAKE SURE HEALTH CARE PROVIDERS CLEAN THEIR HANDS OR WEAR GLOVES.

- Doctors, nurses, dentists and other health care providers come into contact with lots of bacteria and viruses. So before they treat you, ask them if they’ve cleaned their hands.
- Health care providers should wear clean gloves when they perform tasks such as taking throat cultures, pulling teeth, taking blood, touching wounds or body fluids, and examining your mouth or private parts. Don’t be afraid to ask them if they should wear gloves.



3. COVER YOUR MOUTH AND NOSE.

Many diseases are spread through sneezes and coughs. When you sneeze or cough, the germs can travel 3 feet or more! Controlling a cough if you are sick can help prevent the spread of infection to others.

- Use a tissue! Keep tissues handy at home, at work and in your pocket. Be sure to throw away used tissues and then clean your hands.
- If you don’t have a tissue, cover your mouth and nose with the crook of your elbow or hands. If you use your hands, wash your hands right away.



4. IF YOU ARE SICK, AVOID CLOSE CONTACT WITH OTHERS

- If you are sick with a fever or other symptoms of a contagious illness, stay away from other people and stay home. Call work or school and tell them you are sick.
- When you go for medical treatment, call ahead and ask if there's anything you can do to avoid infecting people in the waiting room.



5. GET SHOTS TO AVOID DISEASE AND FIGHT THE SPREAD OF INFECTION

Make sure that your vaccinations are current—even for adults. Check with your doctor about shots you may need. Vaccinations are available to prevent these diseases:

- Chicken pox
- Mumps
- Measles
- Diphtheria
- Tetanus
- Hepatitis
- Shingles
- Meningitis
- Flu (also known as influenza)
- Whooping cough (also known as Pertussis)
- German measles (also known as Rubella)
- Pneumonia (*Streptococcus pneumoniae*)
- Human papillomavirus (HPV)

FIVE THINGS YOU CAN DO TO PREVENT INFECTION IS SUPPORTED BY:

American Hospital Association
www.hospitalconnect.com

Infectious Diseases Society of America
www.idsociety.org

Association for Professionals in Infection Control and Epidemiology, Inc.
www.apic.org

Joint Commission on Accreditation of Healthcare Organizations
www.jcaho.org

Centers for Disease Control and Prevention
www.cdc.gov

Society for Healthcare Epidemiology of America
www.shea-online.org

UNDERSTANDING PRICE AND PAYMENT

Your hospital bill and payment can be confusing. This section will help you understand your hospital charges, billing procedures, and payment options.

UP FRONT PAYMENT

Our practice is to collect all known fees when you register at the hospital, including deductibles, co-payments, and co-insurance, based on estimated charges. Your final bill may be higher or lower than the estimates we use at registration, since it is based on actual charges for services provided. If it is higher, we may ask for additional payment at discharge; if it is lower, we will promptly refund the amount you overpaid.

PAYMENT BY INSURANCE

If you carry health insurance, we will bill your insurance carrier shortly after your visit and then send you an informational letter (not a bill) to let you know about it. Your insurance carrier should pay your bill within 60 days.

Your insurance company may contact you for additional information to process your claim. Please respond as quickly as possible to ensure you receive the maximum benefit from your coverage.

You will not receive further communication from the hospital unless the insurance company has not paid your claim or a balance is due from you (e.g., part not covered by your insurance).

PAYMENT WITHOUT INSURANCE

Our facility offers a discount for patients without health insurance, unless you receive an elective cosmetic procedure. You may ask for information about our Uninsured Discount Program upon registration or at any time during your visit.

After your discount is applied, we will ask for payment of the balance at the time of service. If you are unable to pay, we will work with you to:

- Set up a payment plan
- Obtain coverage through Medicaid
- Apply for a Charity discount

OTHER CHARGES

Your hospital bill contains charges for hospital services only — you will be billed separately for other professional services including:

- Your physician
- ER physicians
- Radiologists
- Hospitalists
- Pathologists
- Cardiologists
- Neonatologists
- Anesthesiologists

Please call the customer service number on that bill if you have questions about any of these charges.

ONLINE BILL PAYMENT

If you have a balance after discharge, the Patient Financial Resource website enables you to pay your bill online with a debit or credit card. Just click the Patient Pricing & Financial Information logo from our hospital's home page and then click the Pay Bill icon to find and pay your bill.

You can call Customer Service at (866) 209-9007 if you have questions; one of our representatives will be happy to help you.

QUESTIONS AND ANSWERS

What services are included in my hospital bill estimate?

If you are viewing estimates provided on the website, pricing includes estimated room and board (for inpatients), supplies, nursing care, equipment use, nutritional services, and any services handled by the staff of the hospital within the walls of the hospital.

Can I get an exact pricing quote?

Unfortunately, no. We will do our best to provide you with a pricing range based on our hospital's historical pricing for comparable services. Price quotes are not guaranteed since the services used to compute the quote can vary from services you receive due to treatment decisions, unforeseen complications, additional tests or services ordered by your physician, and variation in the clinical needs of each patient.

More questions?

Check out the Patient Financial Resource website for a complete set of questions & answers.

KNOWING YOUR PRICE

Our facility now offers you access to the Patient Financial Resource, a website that provides pricing estimates for the most frequently used hospital services, online bill payment, and other helpful information such as:

- Payment options & alternatives for uninsured patients
- Guidelines about our billing process
- Frequently Asked Questions

FINDING YOUR PRICE

Just click on Pay Your Bill and then the Patient Pricing & Financial Information logo from our hospital's home page to get started.

If you're already in the hospital, can't get to the Internet, or wish to speak to one of our friendly Customer Service representatives, you can call the hotline at 1-800-849-0829.

We are available to answer any questions you have concerning your hospital bill.
Customer Service: (866) 209-9019

PRICING HOTLINE:

1-800-849-0829

Look for this icon on the facility website under Pay Your Bill - click it!



FALL PREVENTION

Fall prevention is a high priority for patient safety. With a change in environment or medications, patients may become a greater fall risk. We are providing this information to you because your family member, friend or loved one being cared for in the hospital has been assessed to be at risk for a fall. Our staff will be taking all precautions to help prevent such an event, but we also need your assistance. We ask that you please review and use the following information. If at anytime you have questions or suggestions for injury prevention, please do not hesitate to contact the nurse caring for your loved one.

THINGS YOU CAN DO TO HELP:

- We encourage you to visit and spend as much time as possible with the patient. If the patient is experiencing confusion or disorientation, we may ask if you would be willing to stay with the patient.
- Please do not try to help the patient in and out of bed or from a chair unless you are sure of their status. Illness may cause sudden and significant changes in the patient's strength and ability to walk that may require greater assistance than you had anticipated.
- If you leave, please stop by the nursing station and inform the nurse that the patient will be left alone. Informing our staff of your departure will assist them in better assessing and meeting the patient's needs.
- Please do not leave the patient alone in the chair or in the bathroom.
- Always try to leave the door open when you leave.
- Please do not disconnect the bed alarm. This alarm is being used as a method to prevent a fall. For any questions or concerns regarding this safety measure, please contact the patient's nurse.
- Canes, walkers, leg braces or any other assistive devices should be brought to the hospital and to the staff's attention.
- Bring glasses and hearing aids to the hospital, but please inform the staff of the whereabouts and storage of these items so that we may make sure that they stay with the patient.
- Please remind the patient not to get out of bed without calling for help—it often means more to them coming from you.
- Alert the staff of any and all patient needs.

YOU CAN QUIT SMOKING

NICOTINE: A POWERFUL ADDICTION

If you have tried to quit smoking, you know how hard it can be. It is hard because nicotine is a very addictive drug. For some people, it can be as addictive as heroin or cocaine.

Quitting is hard. Usually people make two or three tries (or more) before finally being able to quit. Each time you try to quit, you can learn about what helps and what hurts.

This section is a service of HCA Midwest Health System and will tell you about ways you can get help to quit smoking. It explains the best ways for you to quit, and quit for good. All the information in this section is based on scientific research about what will give you the best chances of quitting. The section also lists names and addresses of organizations that can offer help and more information. If you are not a smoker, please pass this on to someone you know who might benefit from this information.

Quitting takes hard work and a lot of effort, but you can quit smoking.

GOOD REASONS FOR QUITTING

Quitting smoking is one of the most important things you will ever do:

- Quitting will lower your chance of having a heart attack, stroke, or cancer.
- If you are pregnant, quitting smoking will improve your chances of having a healthy baby.
- You will live longer and live better.
- The people you live with, especially your children, will be healthier.
- You will have extra money to spend on things other than cigarettes.

FIVE COMMON MYTHS ABOUT QUITTING SMOKING

MYTH #1:

Smoking is just a bad habit.

Fact: Tobacco use is an addiction. According to the U.S. Public Health Service Clinical Practice Guideline, Treating Tobacco Use and Dependence, nicotine is a very addictive drug. For some people, it can be as addictive as heroin or cocaine.

MYTH #2:

Quitting is just a matter of will power.

Fact: Because smoking is an addiction, quitting is often very difficult. A number of treatments are available that can help.

MYTH #3:

If you can't quit the first time you try, you will never be able to quit.

Fact: Quitting is hard. Usually people make two or three tries, or more, before being able to quit for good.

MYTH #4:

The best way to quit is cold turkey.

Fact: The most effective way to quit smoking is by using a combination of counseling and nicotine-replacement therapy (such as a nicotine patch, inhaler, gum, or nasal spray) or non-nicotine medicines (such as bupropion SR). Your healthcare provider or smoking-cessation clinic is the best place to go to for help with quitting.

MYTH #5:

Quitting is expensive.

Fact: Treatments cost approximately \$3 to \$10 a day. A one-pack-a-day smoker spends at least \$1,000 a year. Check with your health-insurance plan to find out if smoking-cessation medications and/or counseling are covered.

FREQUENTLY ASKED QUESTIONS

Are you or someone you know trying to quit smoking? If so, the following information may help you. It was taken from a new consumer brochure published by the U.S. Surgeon General.

Why Should I Quit?

You will live longer and feel better. Quitting will lower your chances of having a heart attack, stroke, or cancer. The people with which you live, especially children, will be healthier. If you are pregnant, you will improve your chances of having a healthy baby. Plus, you will have extra money to spend on things other than cigarettes.

What is the first thing I need to do once I've decided to quit?

You should set a quit date—the day when you will break free of your tobacco addiction. Then, consider visiting your doctor or other healthcare providers before the quit date. He or she can help by providing practical advice and information on the medication that is best for you.

What medication would work best for me?

Different people do better with different methods. You have five choices of medications that are currently approved by the U.S. Food and Drug Administration: a non-nicotine pill (bupropion SR), nicotine gum, a nicotine inhaler, a nicotine nasal spray, and a nicotine patch. The gum and patches are available over the counter at your local pharmacy, or you can ask your healthcare provider to write you a prescription for one of the other medications. The good news is that all five medications have been shown to be effective in helping smokers who are motivated to quit.

How will I feel when I quit smoking? Will I gain weight?

Many smokers gain weight when they quit but usually less than 10 pounds. Eat a healthy diet, stay active, and try not to let weight gain distract you from your main goal: quitting smoking. Some of the medications to help you quit may help delay weight gain.

Some of my friends and family are smokers. What should I do when I'm with them?

Tell them that you are quitting, and ask them to assist you in this effort. Specifically, ask them not to smoke or leave cigarettes around you.

What kinds of activities can I do when I feel the urge to smoke?

Talk with someone, go for a walk, drink water, or get busy with a task. Reduce your stress by taking a hot bath, exercising, or reading a book.

How can I change my daily routine, which includes smoking a cigarette with my breakfast?

When you first try to quit, change your routine. Eat breakfast in a different place, and drink tea instead of coffee. Take a different route to work.

I like to smoke when I have a drink. Do I have to give up both?

It's best to avoid drinking alcohol for the first three months after quitting because drinking lowers your chances of success at quitting. It helps to drink a lot of water and other non-alcoholic drinks when you are trying to quit.

I've tried to quit before and it didn't work. What can I do?

Remember that most people try to quit at least two or three times before they are successful. Review your past attempts to quit. Think about what worked and what didn't, and try to use your most successful strategies again.

What should I do if I need more help?

Get individual, group, or telephone counseling. The more counseling you get, the better your chances are of quitting for good. Programs are offered at your local HCA Midwest Health System hospital. Call 816-751-3000 or 913-541-7400 to register for an upcoming class at the hospital or call your local health department for information about programs in your area. Also, talk with your doctor or other healthcare provider.

SPECIAL SITUATIONS OR CONDITIONS

Studies show that everyone can quit smoking. Your situation or condition can give you a special reason to quit.

- Pregnant women/new mothers: By quitting, you protect your baby's health and your own.
- Hospitalized patients: By quitting, you reduce health problems and help healing.
- Heart-attack patients: By quitting, you reduce your risk of a second heart attack.
- Pneumonia patients: By quitting, you reduce your risk of developing pneumonia again.
- Lung, head, and neck-cancer patients: By quitting, you reduce your chance of a second cancer.
- Parents of children and adolescents: By quitting, you protect your children and adolescents from illnesses caused by second-hand smoke.

FIVE KEYS FOR QUITTING

Studies have shown that these five steps will help you quit and quit for good. You have the best chances of quitting if you use them together.

1. Get Ready

- Set a quit date.
- Change your environment.
- Review your past attempts to quit.
- Think about what worked and what didn't.
- Get rid of ALL cigarettes and ashtrays in your home, car and workplace.
- Don't let people smoke in your home.
- Once you quit, don't smoke, not even a puff.

2. Get Support and Encouragement

Studies have shown that you have a better chance of being successful if you have help. You can get support in many ways:

- Tell your family, friends, and co-workers that you are going to quit and want their support. Ask them not to smoke around you or leave cigarettes out in plain sight.
- Talk to your healthcare provider (i.e. doctor, dentist, nurse, pharmacist, psychologist, or smoking counselor).
- Get individual, group, or telephone counseling. The more counseling you have, the better your chances are of quitting. Programs are offered at your local HCA Midwest Health System hospital. Call 816-751-3000 or 913-541-7400 to register for an upcoming class. In addition, you can call your local health department for information about programs in your area.

3. Learn New Skills and Behaviors

- Try to distract yourself from urges to smoke. Talk to someone, go for a walk, or get busy with a task.
- When you first try to quit, change your routine. Use a different route to work. Drink tea instead of coffee. Eat breakfast at a different place.
- Do something to reduce your stress. Take a hot bath, exercise, or read a book.
- Plan something enjoyable to do every day.
- Drink a lot of water and other non-alcoholic fluids.

4. Get Medication and Use it Correctly

Medications can help you stop smoking and lessen the urge to smoke. The U.S. Food and Drug Administration has approved five medications to help you quit smoking:

- bupropion SR - available by prescription
- nicotine gum - available over the counter
- nicotine inhaler - available by prescription
- nicotine nasal spray - available by prescription
- nicotine patch - available by prescription and over the counter

Ask your healthcare provider for advice and carefully read the information on the package. All of these medications will more or less double your chances of quitting and quitting for good. Everyone who is trying to quit may benefit from using medication. If you are pregnant, trying to become pregnant, nursing, under age 18, smoking fewer than 10 cigarettes a day, or have a medical condition, talk to your healthcare provider before taking medications.

5. Be Prepared For Relapse or Difficult Situations

Most relapses occur within the first three months after quitting. Don't be discouraged if you start smoking again. Remember, most people try several times before they finally quit. Here are some difficult situations to watch out for:

- Alcohol: Avoid drinking alcohol. Drinking lowers your chances of success.
- Other Smokers: Being around smoking can make you want to smoke.
- Weight Gain: Many smokers will gain weight when they quit, usually less than 10 pounds. Eat a healthy diet and stay active. Don't let weight gain distract you from your main goal—quitting smoking. Some quit-smoking medications may help delay weight gain.
- Bad Mood/Depression: There are a lot of ways to improve your mood other than smoking.

If you are having problems with any of these situations, talk to your doctor or other healthcare provider.

QUESTIONS TO THINK ABOUT

Think about the following questions before you try to stop smoking. You may want to talk about your answer with your healthcare provider.

1. Why do you want to quit?
2. When you tried to quit in the past, what helped and what didn't?
3. What will be the most difficult situations for you after you quit? How will you plan to handle them?
4. Who can help you through the tough times? Your family? Friends? Healthcare provider?
5. What pleasures do you get from smoking? What ways can you still get pleasure if you quit?

Here are some questions to ask your healthcare provider:

1. How can you help me to be successful at quitting?
2. What medication do you think would be best for me and how should I take it?
3. What should I do if I need more help?
4. What is smoking withdrawal like? How can I get information on withdrawal?

A 5-DAY PLAN TO GET READY

The first step to quitting smoking is to decide to quit. Next, make an appointment with your healthcare provider, or contact a smoking-cessation clinic to discuss your options for treatment. Set a quit date.

PRE-QUIT DAY 5

List all your reasons for quitting, and tell your friends and family about your plan. Stop buying cartons of cigarettes.

PRE-QUIT DAY 4

Pay attention to when and why you smoke. Think of new ways to relax or things to hold in your hand instead of a cigarette. Think of habits or routines you may want to change. Make a list to use when you quit.

PRE-QUIT DAY 3

Make a list of the things you could do with the extra money you will save by not buying cigarettes. Think of whom to reach out to when you need help, like a smoking support group.

PRE-QUIT DAY 2

Buy the over-the-counter nicotine patch or nicotine gum, inhaler, nasal spray, or the non-nicotine pill, bupropion SR. Clean your clothes to get rid of the smell of cigarettes.

PRE-QUIT DAY 1

Think of a reward you will give yourself after you quit. Make an appointment with the dentist to have your teeth cleaned. At the end of the day, throw away all cigarettes and matches. Put away lighters and ashtrays.

QUIT DAY

Keep very busy. Change your routine when possible, and do things out of the ordinary that don't remind you of smoking. Remind family, friends, and co-workers that this is your quit day, and ask them to help and support you. Avoid alcohol. Buy yourself a treat, or do something to celebrate.

DAY 1

Congratulate yourself. When cravings hit, do something else that isn't connected with smoking, like taking a walk, drinking a glass of water, or taking some deep breaths. Call your support network. Find things to snack on, like carrots, sugarless gum, or air-popped popcorn.

TIPS FOR THE FIRST WEEK

Nicotine is a powerful addiction. If you have tried to quit, you know how hard it can be. People who are trying to quit smoking go through both physical and psychological withdrawal. Here are some tips for quitting:

PHYSICAL:

- Drink a lot of liquids, especially water. Try herbal teas or fruit juices. Limit coffee, soft drinks, or alcohol. They can increase your urge to smoke.
- Avoid sugary and fatty foods. Try low-calorie foods for snacking (i.e. carrots and other vegetables, sugarless gum, air-popped popcorn, or low-fat cottage cheese). Don't skip meals.
- Exercise regularly and moderately. Regular exercise helps. Joining an exercise group provides a healthy activity and new routine.
- Get more sleep. Try to go to sleep earlier and get more rest.
- Take deep breaths. Distract yourself. When cravings hit, do something else immediately, such as talking to someone, getting busy with a task, or taking deep breaths.
- Change your habits. Use a different route to work, eat breakfast at a different place, or get up from the table right away after eating.
- Do something to reduce your stress. Take a hot bath or shower, read a book, or exercise.

PSYCHOLOGICAL:

- Remind yourself every day why you are quitting.
- Avoid places you connect with smoking.
- Develop a plan for relieving stress.
- Listen to relaxing music.
- Watch a funny movie.
- Take your mind off a problem and come back to it later.
- Rely on your friends, family and support group for help.
- Avoid alcohol. It lowers your chances for success.

FOR MORE INFORMATION

The information based in this section was taken from Treating Tobacco Use and Dependence, a Public Health Service-sponsored Clinical Practice Guideline. This guideline was developed by a non-federal panel of experts sponsored by a consortium consisting of the federal government and nonprofit organizations: Agency for Healthcare Research and Quality (AHRQ), Centers for Disease Control and Prevention (CDC), National Cancer Institute (NCI), National Heart, Lung, and Blood Institute (NHLBI), National Institute on Blood Institute (NIDA), Robert Wood Robert Foundation (RWJF), and University of Wisconsin Medical School's Center for Tobacco Research and Intervention (CTRI).

For more information about the guidelines of this section, call toll free 800-358-9295, or write to:
Publications Clearinghouse
P.O. Box 8547
Silver Spring, MD 20907

ADDITIONAL RESOURCES

You may want to contact these organizations for further information on smoking and how to quit. For general information:

**HCA Midwest Health System
Smoking Cessation Classes:**
(816) 751-3000 or (913) 541-7400

American Heart Association:
7272 Greenville Ave.
Dallas, TX 75231
(800) AHA-USA1 (242-8721)

American Cancer Society
1599 Clifton Road, NE
Atlanta, GA 30329
(404) 320-3333

American Lung Association
1740 Broadway, 14th Floor
New York, New York 10019
(212) 315-8700

National Cancer Institute
Bethesda, MD 20892
(800) 4-CANCER (422-6237)

**Agency for Healthcare Research
and Quality:** 1-800-358-9295

**Centers for Disease Control and
Prevention:** 1-800-CDC-1311

Surgeon General
www.surgeongeneral.gov/tobacco

**American College of Obstetricians
and Gynecologists**
(for pregnant women)
409 12th Street, SW
Washington, DC 20024
(202) 638-5577

HELPFUL PHONE NUMBERS

ALL PHONE NUMBERS HAVE A "541" PREFIX AND A "913" AREA CODE, UNLESS OTHERWISE NOTED.

Administration	5301
Admitting/Registration	3322
One Day Surgery Admitting	5441
Cardiology:	
Cardiac Cath Lab	5970
Cardiopulmonary Rehab	5471
Cashier.....	5326
Chaplain	5442
Continuum of Care (Social Services)	5601
Diabetes Center.....	3296
Emergency Department.....	5338
Endoscopy Lab (GI Lab).....	5523
Food and Nutrition Services	5411
Gift Shop	5366
Health Information Services	
(Medical Records)	5357
Housekeeping.....	5408
Human Motion Institute (HMI).....	5500
Human Resources	5361
Information Desk.....	5535
Laboratory	5333
Maintenance/Plant Operations.....	5406
Mammography	5991
Marketing Communications	6077
Materials Management	5402
Medical Staff Services	5353
MRI	5892
One Day Surgery.....	5382
Outpatient Clinic	5551

Patient Accounts	5240
Prenatal Community Education	438-4773
Public Relations	6078
Pulmonary/Respiratory Services	5424
Radiology/Imaging	5384
Rehabilitation Services - In-patient	5372
Rehabilitation Services - Burn Clinic.....	5001
Rehabilitation Services - Outpatient.....	5001
Security	5405
Sleep Disorders Center	390-7064
Surgical Services.....	5379
Trauma	5605
Volunteer Services.....	5439
Waiting Rooms:	
Surgery	3622
Critical Care Unit	5621
Maternity.....	6428
The Women's Center	5300
Pharmacies	
Quivira Medical Plaza Pharmacy	5050
Medical Plaza West Pharmacy	5700
Nursing Units	
Telemetry, 2nd Floor	5444
Human Motion Institute-Orthopedics,	
2nd Floor.....	5460
Critical Care Unit (beds 1-26), 2nd Floor	5509
Mother/Baby, 3rd Floor	5540
Antepartum, 3rd Floor.....	5560
Labor/Delivery, 3rd Floor	5456
Nursery, 3rd Floor	5931
Select Specialty, 4th Floor	3280
Medical Surgical, 4th Floor.....	5452
Neonatal Intensive Care Unit, 4th Floor	5275



OUR MISSION

Together We Touch Life...

WE VALUE

People

Quality

Service

Integrity

Community

We are committed to Xtreme Service through our 14 Service Behaviors.