Mission – Vision – Values

MISSION (OUR CALLING):
To share God's love with our community by providing physical, mental and spiritual healing.

VISION (OUR DREAM):
Be the hospital of choice for our community by being the best place to receive care, practice medicine and work.

VALUES (OUR CHARACTER):
COMPASSION: The compassionate, healing ministry of Jesus.
RESPECT: Human dignity and individuality.
INTEGRITY: Absolute integrity in all relationships and dealings.
QUALITY: Excellence in clinical and service quality.
STEWARDSHIP: Responsible resource management in serving our communities.
WHOLENESS: The health care heritage of Seventh-day Adventist Church.
FAMILY: Treat each other as members of a caring family.

Important Numbers
THE AIS CANCER CENTER AND THE OUTPATIENT SURGERY CENTER AT SAN JOAQUIN COMMUNITY HOSPITAL
2620 Chester Ave.
Bakersfield, CA. 93301

IF YOU HAVE ANY QUESTIONS ABOUT YOUR TREATMENT:
The AIS Cancer Center: (661) 323-HOPE (4673)
The Outpatient Surgery Center: (661) 322-SURG (7874)

IF YOU ARE HAVING A MEDICAL EMERGENCY, PLEASE CALL 911.

*Additional, frequently called SJCH phone numbers are listed on page 22.
Welcome to The AIS Cancer Center and Outpatient Surgery Center at San Joaquin Community Hospital

On behalf of the doctors, nurses and the entire support staff of The AIS Cancer Center and Outpatient Surgery Center at San Joaquin Community Hospital (SJCH), it is our sincere pleasure to welcome you to our new facility. Everyone involved in your care understands that your safety, comfort and recovery are our highest priorities.

SJCH is home to many medical advances in our community, including: its Nationally Certified Stroke Center and Nationally Accredited Chest Pain Center under one roof; a nationally recognized Diabetes Education Program; a 64-slice CT scanner; and full-treatment burn center. And now, we’ve added The AIS Cancer Center and Outpatient Surgery Center – all part of our mission to bring more quality health care to our community.

The AIS Cancer Center is a hospital-based, comprehensive center, which includes radiation oncology, medical oncology and the Outpatient Surgery Center – all in one convenient, beautiful location. When we started this project, we learned that 1 in 5 patients leaves this area to seek cancer treatment. Our belief – and we suspect you’ll agree – is that the battle against cancer is tough enough without having to travel long distance, multiple times, for care. With the opening of The AIS Cancer Center, we want to provide you and your family with a solid home field advantage.

Our Outpatient Surgery Center at SJCH offers the latest technology and equipment, along with the convenience for your physician to schedule your outpatient procedure also so close to home. We are proud to add such a valuable service.

But our proudest moments come from the way we put our patients first – in everything. It’s a philosophy we call “Sacred Work.” At SJCH, we believe in treating everyone – patients, family, co-workers – with the compassion, respect and dignity each of us deserves. You can always expect our staff to be courteous, listen to you carefully and explain your treatment clearly and understandably.

This Patient Guide will acquaint you with our procedures, our facility and help answer your questions before, during and after your visit. But, by all means, if you have any other questions, please let us know. Also, for your loved ones here to support you, we have included information to make their time here more comfortable and convenient.

With that, we wish you a comfortable visit and rapid recovery …
Welcome to the Outpatient Surgery Center at SJCH

**PRE-REGISTRATION: WHAT TO DO**

**Note:** Please arrive on time – your appointment is scheduled at least 90 minutes ahead of your procedure, which allows for registration, any possible additional testing and time for you to prepare for your surgery. If you are running late or cannot keep your appointment, please call us immediately at (661) 322-SURG (7874).

- On the day of your procedure, at your appointed check-in time, please come to the lobby of The AIS Cancer Center building at 2620 Chester Ave. and proceed to the fourth floor.
- Bring one other responsible adult to accompany you on the day of your procedure. If the patient is a minor, both parents are welcome to accompany the child.
- Bring any X-rays or test results from outside facilities.
- Bring picture I.D.
- Bring insurance information, a list of all medications (including dosage and time taken), a current list of all your physicians and any other required forms, including doctor’s orders.
- For children undergoing procedures, we encourage parents to bring a favorite stuffed animal, pillow or blanket.
- Bathe or shower on the day of your procedure (reduces chances of infection).
- Notify your physician if you have a cold, fever, skin rash or infection of any kind before coming to the surgery center for your procedure.
- Wear warm clothes or wrap up in blankets (reduces your chance of infection).

**PRE-REGISTRATION: WHAT NOT TO DO**

- Do not eat or drink anything after midnight prior to your procedure.
  (This includes gum, throat lozenges, etc.)
- Do not smoke for at least 12 hours before your procedure.
  **Note:** SJCH is a smoke-free campus. Smoking is prohibited in the hospital as well as the hospital grounds and our other facilities.
- Do not apply lotion.
- Do not shave near the location of your procedure.

**Your Surgery**

When coming to The Outpatient Surgery Center for your surgical procedure, you will check in on the fourth floor at the reception desk. After your registration is complete, you will be escorted to the Pre-Operative area where you will meet with your anesthesia provider who will review your health history, answer any questions you may have and discuss your anesthesia options.

For your safety, a pre-operative checklist is completed that will include checking your armband, verifying your procedure and marking your operative site if necessary. Once this preparation is complete, a loved one is welcome to stay with you until your surgery. For children undergoing surgery, we encourage parents to stay with their child before the procedure and to rejoin them as soon as possible when it is completed. One parent must remain on the premises during the procedure.

It is important for you to stay warm while you wait, and we want you to be comfortable. If you feel cold, please ask the nurse for warm blankets and/or socks for your feet.

When your surgical team is ready for you, a Registered Nurse, who will assist your surgeon, will escort you to one of our state-of-the-art, fully equipped surgery suites.

*The Outpatient Surgery Center is open 7:30 a.m. - 4:30 p.m. M-F.*
Patient Status Updates

While undergoing your procedure, family and friends should wait in the fourth floor waiting room. They can easily track your status via our SurgiNet system. There is a large SurgiNet monitor located in the waiting room that displays a series of numbers and “status” stages. Your privacy is maintained because only you are allowed to give your loved one the confidential number that identifies you on the SurgiNet monitor. If you share this number, your status will be updated as you move from one area to the next (i.e. from an operating room to near completion and recovery).

Also, once your procedure is complete, your surgeon will attempt to speak to your family for an in-person update. However, surgeons will only go to the waiting room area. If your loved ones must leave the waiting area—even if just for a short while—it’s best to check in with the receptionist at the desk on your status. They can tell your loved one if a surgeon was looking for them as well as update your current status.

Note: Please no food on the fourth-floor waiting room; drinks are OK.

Post-Surgery

After your procedure, you may go to the Post Anesthesia Care Unit (PACU) or Ambulatory Recovery area. Your time in either of these areas depends on the type of procedure performed and/or the type of anesthesia used.

You will be discharged home when it is determined you are ready to do so.

After Your Outpatient Procedure

Please arrange for someone to drive you home. For your safety, you will not be allowed to drive home after sedation or anesthesia. If you will be having general anesthesia, you MUST have an adult at home with you for the first 24 hours. You will be asked to provide the name and phone number for these designated persons upon your arrival. If you do not provide this information, your procedure will be canceled.

At Home

After outpatient surgery, it is important that you rest. Do not do any of the following for 24 hours after your surgery: drive, drink alcoholic beverages, make critical decisions, use chemical substances or take drugs or medications not approved by your physician.

Privacy Policy

If you want our staff to release information, please share the privacy number with your loved ones given to the patient or next of kin through Registration.

Should you have any questions, contact the Hospital Privacy Official at (661) 395-3000.

Follow-Up

You may receive a follow-up call after your procedure. If you, or your family, have questions, don’t wait! Call (661) 322-SURG (7874) .

After Procedure Activities

Activity following your procedure reduces complications and speeds recovery.
ACTIVITY WILL HELP:

• Expand your lungs after anesthesia.

• Prevent the development of lung infection.

• Assist the bowels in resuming normal functioning.

• Prevent blood from pooling in the legs, which can lead to blood clots in the legs, lungs and brain.

To maximize your activity efforts, always have your nurse or a family member/friend assist in your first attempts to get out of bed and/or walk. Slight dizziness and unsteadiness is common and will get better as activity increases.

Getting out of bed the correct way will help to minimize your pain. Before sitting up, turn on your side. Lower your legs off the bed as you push yourself to a sitting position with your arms (keep your spine very straight). Reverse this process when you return to bed.

Always ensure you’ve had enough pain medication before attempting to walk. Talk to your nurse or physician if you feel too much pain when you walk.

IMPROVE YOUR CIRCULATION WITH LEG EXERCISE*

With legs straight out, point your toes toward the end of the bed (sofa or chair) for a count of five, then pull your toes up toward your body for a count of five. Repeat the process 10 to 20 times each hour while you are in bed or resting.

While exercises alone cannot guarantee an easy recovery, many studies have shown that those patients who increase their activity quickly after surgery feel stronger, have fewer complications and recover faster.

*For any lower body surgery, follow your physician’s post-operation instructions.

BREATHE DEEP, GET WELL

Expanding your lungs after anesthesia reduces the risk of infection.

PREVENT LUNG PROBLEMS

To prevent lung problems, it is important that you practice the following deep breathing exercises after your procedure:

DEEP BREATHING AND COUGHING

Sit upright if possible. If you had a chest or abdominal procedure, supporting the incision may decrease pain. Place one hand above the incision and the other below, and press gently. A small pillow may be used to press gently over the incision to provide support.

Breathe deep, hold for 3 to 5 seconds, then exhale quickly.

REPEAT WITH A SECOND BREATH

Take a second deep breath, but this time hold your breath and cough two or three times. (Once is not enough!)

Rest and then repeat the process 3 to 5 times each hour when you are awake for the first two days after your procedure.

INCENTIVE SPIROMETRY

Another breathing technique that your surgeon may recommend utilizes a device called an incentive spirometer that mimics natural sighing or yawning and provides information about your breathing.

HOW TO USE:

• Sit upright if possible.

• Place lips tightly around the mouthpiece.

• Take in a slow, deep breath to raise the white piston in the chamber and the yellow cup in the “best” slow range.

• When inhalation is complete, remove the mouthpiece and hold your breath for 5 to 10 seconds.

• Relax and breathe normally.

• Repeat 10 times each hour when you wake for the first 48 hours after your procedure.

The first two days after your procedure, you should do these exercises every hour when you are awake. As you become more active, it is OK to do these exercises less frequently.
Infectious Disease Prevention

Minimizing the spread of infectious disease is important to you and the welfare of others. Patients and family members should make sure to wash their hands or use hand sanitizers, provided throughout the facility.

Also, good respiratory hygiene should be used by covering your cough. If you have a history of, or have been diagnosed with, an infectious disease, you may be placed in Contact Precautions. This precaution would require gloves to be worn by anyone who would enter the room or area you are placed and hand washing, before entering and after leaving the area you are placed.

Pain Management

WHAT YOU CAN DO TO HELP US MANAGE YOUR PAIN

• Pain is expected after any surgical procedure.

• Our goal is to ALWAYS HELP CONTROL your pain.

• Control of pain does not mean the TOTAL absence of pain. It is the pain level that allows you to do your daily tasks, such as deep breathing, turning, walking and participating in therapy.

AFTER SURGERY

While some pain post-procedure is expected, unmanaged pain serves no useful purpose after your procedure. It is harmful physically, delaying the healing process. Unmanaged pain prevents you from breathing deeply and actively moving, increases your need for extra oxygen and causes the body to use up energy.

Pain can also cause your blood pressure to rise and make rest and sleep difficult, slowing your healing. These are the reasons why pain management after your procedure or illness is very important. You can play an active role in helping keep your pain at a manageable level after your procedure.

After your operation, your nurses and doctors will ask you about your pain. This is because they want you to be comfortable; they want to know if something is wrong. Be sure to let them know when you have pain.

WAYS YOU CAN HELP US TO HELP YOU:

Our Goal is to ALWAYS help control your pain!

Tell us when you are having pain. It is easier to relieve mild or moderate pain. DO NOT WAIT until you have a lot of pain to tell your nurse. Pain controlled early may mean that you can take less medicine.

How bad is the pain? Being able to describe the pain level can help us decide what to do to treat your pain and how well treatment is working, or whether to make any changes.

DESCRIBE YOUR PAIN TO US:

What type of pain are you having? For example: aching, stabbing, throbbing, burning, dull, sharp, shooting, tender or radiating pressure.

Where is the pain located? When did the pain start? Is the pain always there? Does the pain come and go? What relieves the pain or makes it worse?

Be sure to let the doctors and nurses know of pain that will not go away.

How does the pain affect your life? For example: eating, sleeping, energy level, mood, work, activity, relationships, depression and anxiety. Do you have other symptoms like nausea, vomiting, restlessness, bladder problems, sleepiness or rash?

What about children experiencing pain? Assessing the pain of infants and young children can be difficult since the symptoms and behaviors they show can also be the result of other problems like: hunger, dirty diapers, tiredness, etc. However, parents should consider pain as a potential cause, especially after any hospital procedures.

Pain Control Methods Available To You

SUGGESTED NON-DRUG METHODS OF PAIN MANAGEMENT

• Visual imagery

• Deep breathing and relaxation techniques

• Massage or vibration

• Hot or cold packs

• Resting quietly

• Distraction (Example: music)

• “Splinting” (pressure to the surgical site with a pillow when coughing, sneezing or laughing) after chest or belly surgery
MEDICATIONS

This includes pills to take by mouth, patches to put on the skin, injection either in your muscle or through your IV. Another method of getting medication is through a Patient-Controlled Analgesia (PCA) pump, which allows you to control when you get the medication. Medication is injected into your IV when you press the button.

If you know that your pain will get worse when you start walking or doing breathing exercises, take pain medication before your activities.

Both drug and non-drug treatments can be used together to successfully minimize and manage pain.

Be sure to talk with your doctors and nurses to determine what will work best for you. Also, don’t worry about becoming addicted to pain medication. Research studies have shown that it is a rare occurrence, unless you already have a history of drug abuse.

Pain management is effective in speeding the healing process. With pain at a tolerable level, you can start moving around and do breathing exercises. As a result, you will get well faster and may even be discharged from the hospital sooner.

Your Nutritional Health

The warning signs of poor nutritional health are often overlooked. Use this checklist to find out if you are at nutritional risk. Read the statements below. Circle “Yes” or “No” for the answers that apply to you:

- **YES NO** I have eaten less than 50% of my meals in the past week.
- **YES NO** Without wanting to, I have lost at least 20 pounds in the past 6 months.
- **YES NO** I am on a special diet and do not understand the diet.
- **YES NO** I do not always have enough money to buy the food I need.
- **YES NO** I am not always physically able to shop, cook and/or feed myself.

If you circled “Yes” for any of the above statements, you may be at nutritional risk and should discuss your results with your physician, nurse or therapist.

If you would like individual nutritional counseling, please ask your primary care physician for a referral to an outpatient dietitian available at The Wellness Center at SJCH: **(661) 869-6580**. There is a fee for this service, so we suggest you check your health insurance coverage first.

If you would like information regarding general nutrition or nutrition and specific diseases, call:

- American Cancer Society: (661) 327-2424 or (800) 227-2345 (24hrs)
- American Diabetes Association: (800) 342-2383 or www.diabetes.org
- American Diabetic Association: (800) 877-1600 or www.eatright.org
- American Heart Association: (661) 327-1173 or www.americanheart.org
- Celiac Sprue Association: (402) 558-0600 or www.csaceliac.org
- Crohns and Colitis Foundation of America: 800-932-2423 or www.ccfa.org
- Food Allergy Research Education: (800) 929-4040 or www.foodallergy.org
- United Ostomy Association: (800) 826-0826 or www.uoa.org
- The Wellness Center at SJCH: (661) 869-6580 (Cardiac, Pulmonary and Diabetes)

If you would like information on home meal delivery or meals served at senior centers call:

- Senior Nutrition Services (Meals-On-Wheels): (661) 868-0973
- Homegrocer.com: (800) 688-0201 or www.homegrocer.com

If you would like information on obtaining low-cost meals/free meals/food boxes, call:

- Bakersfield Food Bank: (661) 398-4520
- United Way Help Line: (661) 336-5200 or dial 211
- WIC (for pregnant, breast-feeding or newly delivered mothers): (661) 862-5422
Being informed, asking questions and talking about pain control is half the battle.

**Something To Talk About**

**YOU HAVE RIGHTS AND RESPONSIBILITIES**

As a patient, you can expect:
- A concerned staff, committed to pain management.
- Information about pain and pain relief measures.
- Staff who are responsive to your reports of pain.

As a patient, we rely on you to:
- Ask your nurses and doctors what to expect.
- Discuss pain relief options with your doctors and nurses.
- Work with your doctors and nurses to make a pain relief plan.
- Ask for pain relief measures when pain first begins.
- Help the doctors and nurses measure your pain.
- Tell your doctors or nurses about any pain that does not go away.
- Not worry about getting “hooked” on pain medication.
- Inform your doctors and nurses of any past or current alcohol or drug abuse.

Thank you for working with us to manage your pain!

**THINGS TO REMEMBER**

- Before surgery, ask your doctors and nurses about what to expect; being prepared helps put you in control.
- Discuss the pain control options with your doctors and nurses before your procedure.
- Tell your doctors and nurses about pain control methods that have worked well for you in the past.
- Talk with your doctors and nurses about any concerns you may have about pain medicine.
- Inform your doctors and nurses about any allergies you may have.
- Ask about any side effects that may occur with treatment.
- Talk with your doctors and nurses about the medicines you take for other health problems.
- Talk about the schedule for pain medicines in the hospital. Some patients get medications at set times during the day, others only when they need it and ask for it. Your nurses and doctors will ask about how the pain medicine is working and may change the medicine, dose or timing if you are still having pain.
- Ask for pain relief medicines when pain first begins. It is easier to ease pain if treatment is started sooner.
Blood Transfusions

WHAT IS A BLOOD TRANSFUSION?
It’s a medical treatment that gives you certain blood products or parts of blood that your body needs to stay healthy.

WHY WOULD YOU NEED A BLOOD TRANSFUSION?
• You’ve lost blood due to surgery, trauma, gastrointestinal (stomach) bleeding or other conditions.
• You’ve lost more than 20% of your total blood volume (more than one liter or four cups).
• You have a low red blood count and medicine has not helped.
• Your platelets or clotting factors are low and not working properly.

What are the Risks of a Blood Transfusion?

ALLERGIC REACTIONS
Allergic reactions are usually mild and easy to resolve with treatment. Severe allergic reactions are extremely rare.

FEVER
Fever is a common reaction, usually not severe and easy to resolve with treatment. Tell your doctor if you’ve developed a fever after a blood transfusion in the past.

HEMOLYTIC REACTIONS
Hemolytic reactions are a rare occurrence and only happen if your blood destroys the red blood cells from the donor blood. These reactions can sometimes be severe and cause bleeding or kidney failure, but can be resolved with treatment.

If You Need Blood
You have several options. These options include receiving blood from the community, using your own blood (autologous), or blood from donors whom you have selected (designated donors). Your options may be limited by time and health factors.

Although you have the right to refuse a blood transfusion, this decision may hold life-threatening consequences. It is important to weigh the risks, costs and benefits of donating your own blood before surgery. Many elective surgeries do not require blood transfusions.

If you have questions about transfusion needs or options, please ask your doctor. Check with your insurance company about your costs for donation. If you choose not to donate your own blood, or if more blood is required than expected, you may receive blood other than your own.

You will be asked to sign a transfusion consent or refusal form. Ensure all your questions have been answered prior to signing this consent.
COMMUNITY DONORS

Hospitals maintain a supply of blood from volunteer (unpaid) community donors to meet transfusion needs. Community blood donors are screened by a thorough medical history and then tested with the most accurate technology available.

Our nation’s blood supply is very safe and high in quality. However, nothing in life is risk-free, but the risks associated with blood transfusion are very small. The chance that a unit (pint) of blood will transmit Human Immunodeficiency Virus (HIV) -- the virus that causes AIDS -- or hepatitis C is about 1 in 2 million. The chance that a unit (pint) will transmit hepatitis B is less than 1 in 200,000.

Although the risk for other serious infections exists, that risk is much less than the annual risk of dying in a motor vehicle accident in the United States (1 in 7,000).

USING YOUR OWN BLOOD – AUTOLOGOUS DONATION

Using your own blood (autologous) can minimize the need for transfusion with donor blood. Using your own blood will reduce, but not eliminate, the risk of transfusion-related infections and allergic reactions.

Patients who donate their own blood before their procedure have lower levels at the time of surgery and, therefore, have a greater chance of needing transfusions during or after their procedure. Autologous blood donations are not an option for all patients. It may not be safe for you to donate. Ask your doctor if autologous donation is appropriate for you.

DONATING BEFORE SURGERY

Blood banks can draw your blood and store it for your use. This process is usually performed for a planned procedure. Blood can be stored for only a limited period of time, so coordinating the donations with the date of the procedure is important.

DONATING DURING A PROCEDURE AND/OR AFTER/BETORE A PROCEDURE

Immediately before your procedure, your doctor may be able to remove some of your blood and replace it with other fluids. After the procedure, the blood that was removed may be returned to you.

In addition, the surgeon may be able to recycle your blood during the procedure. Blood that normally is shed and discarded during the procedure could be collected, processed and returned to you. A large volume of your blood can be recycled in this way. Blood that is lost after a procedure may be collected, filtered and returned to you.

DESIGNED DONORS

Although the blood supply today is very safe, some patients prefer to receive blood from people they know - “designated (or directed) donors.” This blood is not safer than blood from volunteer community donors.

In some cases, it may be less safe because donors known to the patient might not be truthful about their personal history. Blood donated by someone who was recently exposed to HIV or other infections could pass the screening tests and infect you.

Designated donors must meet the same requirements as community donors. Several days notice is required for the additional processing of designated donors.

If you have additional questions about your options for blood transfusion, please ask your doctor. Information can also be obtained by calling your local community blood center or hospital blood bank.


The risk estimates were adjusted to include first-time and repeat donors.
Make Your Wishes Known
Rest easier by making decisions about the future of your health care prior to your procedure.

ADVANCE DIRECTIVES
Illness or injury can happen at any time. Do your family and friends know your health care wishes? Would they know what to do if you couldn’t make decisions for yourself? Does your doctor know what treatments you want or do not want?

Take the power into your own hands with an advance directive. With an advance directive, you can make sure you get the care you want if you are ever unable to make or communicate your medical decisions.

You will feel assured knowing that your choices can be honored immediately without losing valuable time and that decisions will be easier for your loved ones to make.

Your Right to Make Decisions about Medical Treatment

WHO DECIDES ABOUT MY TREATMENT?
Your doctors will give you information and advice about treatment. You have the right to choose. You can say “yes” to treatments you want. You can say “no” to any treatment that you don’t want, even if the treatment might keep you alive longer.

HOW DO I KNOW WHAT I WANT?
Your doctor must tell you about your medical condition and about what different treatments and pain management alternatives can do for you. Many treatments have “side effects.” Your doctor must offer you information about problems that medical treatment is likely to cause you.

Often, more than one treatment might help you and people have different ideas about which is best. Your doctor can tell you which treatments are available to you, but your doctor can’t choose for you. That choice is yours to make and depends on what is important to you.

CAN OTHER PEOPLE HELP WITH MY DECISIONS?
Yes. Patients often turn to their relatives and close friends for help in making medical decisions. These people can help you think about the choices you face. You can ask the doctors and nurses to talk with your relatives and friends. They can ask the doctors and nurses questions for you.

CAN I CHOOSE A RELATIVE OR FRIEND TO MAKE HEALTH CARE DECISIONS FOR ME?
Yes. You must tell your doctor that you want someone else to make health care decisions for you. Ask the doctor to list that person as your health care “surrogate” in your medical record. The surrogate’s control over your medical decisions is effective only during treatment for your current illness or injury or, if you are in a medical facility, until you leave the facility.

WHAT IF I BECOME TOO SICK TO MAKE MY OWN HEALTH CARE DECISIONS?
If you haven’t named a surrogate, your doctor will ask your closest available relative or friend to help you decide what is best for you.

Sometimes everyone doesn't agree about what to do. That’s why it is helpful if you can say in advance what you want to happen if you can’t speak for yourself.

DO I HAVE TO WAIT UNTIL I AM SICK TO EXPRESS MY WISHES ABOUT HEALTH CARE?
No. In fact, it is better to express your wishes before you get very sick or have to go into a hospital, nursing home or other health care facility. You can use an Advance Health Care Directive to say who you want to speak for you and what kind of treatments you want.

These documents are called “advance” because you prepare one before health care decisions need to be made. They are called “directives” because they state who will speak on your behalf and what should be done.

In California, the part of an advance directive you can use to appoint an agent to make health care decisions is called a Power of Attorney for Health Care. The part where you can express what you want done is called an Individual Health Care Instruction.

WHO CAN MAKE AN ADVANCE DIRECTIVE?
You can, if you are 18 years of age or older and are capable of making your own medical decisions. You do not need a lawyer.

WHO CAN I NAME AS MY AGENT?
You can choose an adult relative, or any other person you trust, to speak for you when medical decisions must be made.
WHEN DOES MY AGENT BEGIN MAKING MY MEDICAL DECISIONS?

Usually, a health care agent will make decisions only after you lose the ability to make them for yourself. But, if you wish, you can state in the Power of Attorney for Health Care that you want the agent to begin making decisions immediately.

HOW DOES MY AGENT KNOW WHAT I WANT?

After you choose your agent, talk to that person about what you want. Sometimes treatment decisions are difficult to make and it truly helps if your agent knows what you want. You can also write your wishes down in your advance directive.

WHAT IF I DON’T WANT TO NAME AN AGENT?

You can still write out your wishes in an advance directive without naming an agent. You can say that you want to have your life continued as long as possible. Or, you can say that you would not want treatment to continue your life. Also, you can express your wishes about the use of pain relief or any other type of medical treatment.

Even if you have not filled out a written Individual Health Care Instruction, you should discuss your wishes with your doctor, and ask to list those wishes in your medical record. Or, you can discuss your wishes with your family members or friends. But it will probably be easier to follow your wishes if you write them down.

WHAT IF I CHANGE MY MIND?

You can change or cancel your advance directive at any time, as long as you can communicate your wishes. To change the person you want to make your health care decisions, you must sign a statement or tell the doctor in charge of your care.

WHAT HAPPENS WHEN SOMEONE ELSE MAKES DECISIONS ABOUT MY TREATMENT?

The same rules apply to anyone who makes health care decisions on your behalf – a health care agent, a surrogate whose name you gave to your doctor, or a person appointed by a court to make decisions for you. All are required to follow your health care instructions or, in the absence of instructions, your general wishes about treatment.

If your treatment wishes are not known, the surrogate must try to determine what is in your best interest. The people providing your health care must follow the decisions of your agent or surrogate unless a requested treatment would be bad medical practice or ineffective in helping you. If this causes disagreement that cannot be worked out, the provider must make a reasonable effort to find another health care provider to take over treatment.

WILL I STILL BE TREATED IF I DON’T MAKE AN ADVANCE DIRECTIVE?

Absolutely. You will still get medical treatment. We just want you to know that if you become too sick to make decisions, someone else will have to make them for you.

Remember that:

A Power of Attorney for Health Care lets you name an agent to make decisions for you. Your agent can make most medical decisions – not just those about life-sustaining treatment – when you can’t speak for yourself. You can also let your agent make decisions earlier if you wish.

You can make your health care wishes known by writing them down or by talking with your doctor and asking the doctor to record your wishes in your medical file. If you know when you would or would not want certain types of treatment, an instruction provides a good way to make your wishes clear to your doctor and to anyone else who may be involved in deciding about treatment on your behalf. These two types of advance health care directives may be used together or separately.

HOW CAN I GET MORE INFORMATION ABOUT MAKING AN ADVANCE DIRECTIVE?

Ask your doctor, nurse, social worker, or health care provider to get more information for you. You can have a lawyer write an advance directive for you, or you can complete an advance directive by filling in the blanks on a form available from Registration Department at San Joaquin Community Hospital (SJCH).

Note: Are you or someone dear to you living with an advanced illness or life-threatening condition? The SJCH Palliative Care team is dedicated to helping you cope with the challenges that a serious illness presents. Our Palliative Care team provides expertise in pain and symptom relief, emotional and spiritual support, and discussions about goals of care and treatment decisions such as forgoing or withdrawing life-sustaining treatment, and withholding resuscitative services. If you think palliative care is right for you or a loved one, please let your nurse know or contact The Palliative Care Department at (661) 869-6627. Our team will be able to provide you with the education and resources that can help you with the decision-making process.
Information for the Family & Friends of Our Patients

For the convenience of our patients’ families and friends, we have spacious waiting areas, a public cafeteria at the main hospital across the street and some snack items available at The AIS Cancer Center Gift Gallery. To maximize the safety of our staff, patients and guests, please ensure that you are free of illness before visiting your family member or friend in the center.

SJCH respects the rights of patients to choose who may accompany them when they are at The AIS Cancer Center or The Outpatient Surgery Center. Visitors shall not be restricted, limited or otherwise denied on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation or disability. Upon admission, patients will be informed of their visitation rights, including any clinical restriction or limitation on such rights if applicable.

As a patient, you have the right, subject to the patient’s consent, to receive the visitors whom you designate, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member or a friend, and the right to withdraw or deny such consent at any time.

At SJCH, we want visitors to enjoy full and equal visitation privileges consistent with patient preferences. SJCH will only restrict visitation when it has been determined to be clinically necessary, or:

• To protect the patient or others from injury
• To prevent deterioration of the patient’s condition
• To prevent infringement on the rights of others
• To prevent damage to the environment
• To support the wishes and requests of the patient

FREE VALET PARKING
For our visitors’ convenience, The AIS Cancer Center and Outpatient Surgery Center offers valet parking service at no charge (including a no-tips policy). From 7:30 a.m. to 5 p.m., Monday-Friday, just pull your vehicle to the front of our main entrance and a professional valet will be happy to take your keys and park your car on your behalf. You will be given a ticket that will be used to retrieve your car when you are ready to leave our facility.

ADDITIONAL PARKING OPTIONS
• Front hospital parking lot: Located on Chester Avenue between 26th and 27th streets. (Free valet option also available)
• Two parking garages with more than 700 parking spaces: Entrances to both lots located on 28th Street, just north of Chester Avenue.

HOSPITAL CAFETERIA HOURS
Our cafeteria is located in the main hospital’s basement level across the street (2615 Chester Ave. and is open 7 a.m. to 8 p.m., Monday-Friday; 7 a.m. to 6:30 p.m., Saturday-Sunday.)

GIFT GALLERY AT THE AIS CANCER CENTER HOURS
8 a.m. - 4 p.m., Monday-Friday

CHILDREN
Children are permitted under the supervision of an adult. Depending on a patient’s condition, our medical staff may determine that children are not permitted to visit at a particular time.

DISCOUNTED LODGING
SJCH has partnered with multiple hotels and extended-stay facilities across Bakersfield to provide discounted lodging for those whose loved ones are undergoing treatment. For more information on rates, use the contact information below:

Courtyard by Marriott
3601 Marriott Drive
Bakersfield, CA 93308
(661) 324-6660

DoubleTree Hotel
3100 Camino Del Rio Court
Bakersfield, CA 93308
(661) 323-7111

Marriott at the Convention Center
801 Truxtun Avenue
Bakersfield, CA 93301
(661) 323-1900

Springhill Suites by Marriott
3801 Marriott Drive
Bakersfield, CA 93308
(661) 377-4000
Free Wireless Internet is Available at SJCH
All you need is a laptop or another wireless-enabled device. When you are ready to connect to the Internet while visiting the hospital or other select campus buildings, take the following steps to connect:

• Enable the wireless adapter on your device.
• Search for available connections.
• Connect to “AHPublic.”
• Open your Internet browser.
• On the “Login Page,” review the terms of use.
• If you agree, click “I accept the terms above.”

You are now connected, begin browsing!

Note: There are a limited number of users allowed at one time on SJCH’s wireless network. If you receive an error message, try your connection again at a later time.

The AIS Cancer Center Gift Gallery
HOURS
Monday - Friday: 8 a.m. - 4 p.m.

Wendy Wayne Resource Library
HOURS
Monday - Friday: 8 a.m. - 4 p.m.

Chaplains
SJCH is staffed by a team of certified hospital chaplains. The chaplain’s office is located on the first floor of the hospital, next to the hospital chapel. You may contact a chaplain during normal business hours at (661) 869-6629.

Chapel
SJCH’s chapel is located on the first floor of the main hospital (between the main lobby and elevators). The chapel is used on a first-come, first-serve basis and may be accessed 24 hours a day, seven days a week.

Like SJCH on Facebook at:
www.facebook.com/SJCHBakersfield

Follow SJCH on Twitter @SJCHBakersfield or http://twitter.com/SJCHBakersfield
Speak Up: Help Prevent Errors in Your Care

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 a 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.

The Institute of Medicine (The IOM) recommends, among other things, that a concerted effort be made to improve the public's awareness of the possible health care errors. The “Speak Up” program, sponsored by The Joint Commission, 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.

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.

Educate yourself about your diagnosis, the medical tests you are undergoing and your treatment plan. Ask a trusted family member or friend to be your advocate.

Tell your nurse or doctor if something doesn’t seem quite right. Expect health care workers to introduce themselves when they enter your room and look for their identification badges.

A new mother, for example, should know 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 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.

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 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.

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.

To help prevent health care errors, patients are urged to “Speak Up.” Speak up if you have questions or concerns, and if you don’t understand, ask again. It’s your body and you have the right to know. Early recognition and response to changes in patient condition is important. Therefore, if you or your family notice that your condition appears to be worsening, please contact your nurse immediately.

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 are 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 that you are about to receive the wrong kind of medication.

SJCH encourages patients to watch an online safety video at: www.sjch.us/safetyvideo

Free Wireless Internet (Wi-Fi) is available at the AIS Cancer Center and Outpatient Surgery Center. (See page 13 for details on how to connect.)
You will be able to rest more comfortably and your advocate can help 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 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.qualitycheck.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 can also tell you what to expect and what worked best for them as they recovered.

If this facility has not addressed or cannot resolve these issues or concerns, we would like to encourage you to contact The Joint Commission at:

Office of Quality Monitoring
The Joint Commission
One Renaissance Boulevard
Oakbrook Terrace, Illinois  60181

www.jointcommission.org
E-mail: complaint@jointcommission.org
(800) 994-6610 / Fax: (630) 792-5636
YOU HAVE THE RIGHT TO:

1. Considerate and respectful care, and to be made comfortable. You have the right to respect for your cultural, psychosocial, spiritual, and personal values, beliefs and preferences.

2. Have a family member (or other representative of your choosing) and your own physician notified promptly of your admission to the hospital.

3. Know the name of the licensed health care practitioner acting within the scope of his or her professional licensure who has primary responsibility for coordinating your care, and the names and professional relationships of physicians and nonphysicians who will see you.

4. Receive information about your health status, diagnosis, prognosis, course of treatment, prospects for recovery and outcomes of care (including unanticipated outcomes) in terms you can understand. You have the right to effective communication and to participate in the development and implementation of your plan of care. You have the right to participate in ethical questions that arise in the course of your care, including issues of conflict resolution, withholding resuscitative services, and forgoing or withdrawing life-sustaining treatment.

5. Make decisions regarding medical care, and receive as much information about any proposed treatment or procedure as you may need in order to give informed consent or to refuse a course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved, alternate courses of treatment or nontreatment and the risks involved in each, and the name of the person who will carry out the procedure or treatment.

6. Request or refuse treatment, to the extent permitted by law. However, you do not have the right to demand inappropriate or medically unnecessary treatment or services. You have the right to leave the hospital even against the advice of members of the medical staff, to the extent permitted by law.

7. Be advised if the hospital/licensed health care practitioner acting within the scope of his or her professional licensure proposes to engage in or perform human experimentation affecting your care or treatment. You have the right to refuse to participate in such research projects.

8. Reasonable responses to any reasonable requests made for service.

9. Appropriate assessment and management of your pain, information about pain, pain relief measures and to participate in pain management decisions. You may request or reject the use of any or all modalities to relieve pain, including opiate medication, if you suffer from severe chronic intractable pain. The doctor may refuse to prescribe the opiate medication, but if so, must inform you that there are physicians who specialize in the treatment of severe chronic pain with methods that include the use of opiates.

10. Formulate advance directives. This includes designating a decision maker if you become incapable of understanding a proposed treatment or become unable to communicate your wishes regarding care. Hospital staff and practitioners who provide care in the hospital shall comply with these directives. All patients' rights apply to the person who has legal responsibility to make decisions regarding medical care on your behalf.

11. Have personal privacy respected. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. You have the right to be told the reason for the presence of any individual. You have the right to have visitors leave prior to an examination and when treatment issues are being discussed. Privacy curtains will be used in semi-private rooms.

12. Confidential treatment of all communications and records pertaining to your care and stay in the hospital. You will receive a separate “Notice of Privacy Practices” that explains your privacy rights in detail and how we may use and disclose your protected health information.

13. Receive care in a safe setting, free from mental, physical, sexual or verbal abuse and neglect, exploitation or harassment. You have the right to access protective and advocacy services including notifying government agencies of neglect or abuse.
14. Be free from restraints and seclusion of any form used as a means of coercion, discipline, convenience or retaliation by staff.

15. Reasonable continuity of care and to know in advance the time and location of appointments as well as the identity of the persons providing the care.

16. Be informed by the physician, or a delegate of the physician, of continuing health care requirements and options following discharge from the hospital. You have the right to be involved in the development and implementation of your discharge plan. Upon your request, a friend or family member may be provided this information also.

17. Know which hospital rules and policies apply to your conduct while a patient.

18. Designate visitors of your choosing, if you have decision-making capacity, whether or not the visitor is related by blood or marriage, unless:
   • No visitors are allowed.
   • The facility reasonably determines that the presence of a particular visitor would endanger the health or safety of a patient, a member of the health facility staff or other visitor to the health facility, or would significantly disrupt the operations of the facility.
   • You have told the health facility staff that you no longer want a particular person to visit.

However, a health facility may establish reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors. The health facility must inform you (or your support person, where appropriate) of your visitation rights, including any clinical restrictions or limitations. The health facility is not permitted to restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.

19. Have your wishes considered, if you lack decision-making capacity, for the purposes of determining who may visit. The method of that consideration will comply with federal law and be disclosed in the hospital policy on visitation. At a minimum, the hospital shall include any persons living in your household and any support person pursuant to federal law.

20. Examine and receive an explanation of the hospital’s bill regardless of the source of payment.

21. Exercise these rights without regard to sex, race, color, religion, ancestry, national origin, age, disability, medical condition, marital status, sexual orientation, educational background, economic status or the source of payment for care.

22. File a grievance. If you want to file a grievance with this hospital, you may do so by writing or by calling SJCH, 2615 Chester Ave. Bakersfield, CA 93301 661-395-3000: The grievance committee will review each grievance and provide you with a written response within 30 days. The written response will contain the name of a person to contact at the hospital, the steps taken to investigate the grievance, the results of the grievance process, and the date of completion of the grievance process. Concerns regarding quality of care or premature discharge will also be referred to the appropriate Utilization and Quality Control Peer Review Organization (PRO).

23. File a complaint with the California Department of Public Health regardless of whether you use the hospital’s grievance process. The California Department of Public Health’s phone number and address is: 661-336-0543. 4540 California Ave., Suite 200. Bakersfield, CA 93309.

24. File a complaint with The Joint Commission in the event you have any concerns about patient care and safety at San Joaquin Community Hospital that the hospital has not addressed or been resolved by hospital management. The number for The Joint Commission is: 1-800-994-6610. One Renaissance Boulevard. Oakbrook Terrace, Illinois 60181.
Your Patient Account

We know you’re here to get better. Patient Financial Services at San Joaquin Community Hospital (SJCH) is here to make the billing process as convenient as possible.

UNDERSTANDING YOUR STATEMENT

To help you read your bills, a sample statement is pictured at right.

Please pay close attention to the “Important Message” box. Our Patient Financial Services department may use it to provide information or ask you to:

- Contact your insurance company.
- Apply for financial assistance.
- Contact our billing office.
- Make a payment.

If you have health insurance, we will bill your health plan and send you a statement. You should only pay your deductible and co-insurance at this time. Once your insurance company has processed your claim, we will send you another statement. You must then pay any unpaid balance.

If you do not have insurance, the first statement you receive is your bill. Full payment is due when you receive a bill request for payment. If you need to make other financial arrangements, please call our Patient Financial Services department.

PAYING YOUR BILL

Our financial counselors can help you understand your insurance coverage, apply for government aid or make interest-free payment arrangements. We are also happy to provide you with an itemized billing statement.

We accept VISA, MasterCard, Discover and American Express. We can also arrange short-term payment plans as needed.

ABOUT OUR SERVICES

Patient Financial Services is made up of several departments: Admitting and Registration as well as the Patient Financial Services Office, which is responsible for all billing and collections.

We have opened a patient account in your name where we will record all financial transactions related to your care. If you have given us insurance information, we will submit a claim on your behalf and will keep you informed of the outcome.

Note: Most doctors are independent practitioners and are not SJCH employees or agents. They will bill you and/or your insurance company separately.

BILLING QUESTIONS

If you have any questions or concerns, please feel free to call the Patient Financial Services phone number on your billing statement. For your convenience, it is also listed below. No-cost translation services are available upon request.

HOW TO REACH US

If you have a question about your bill, please contact Patient Financial Services:
Phone: (661) 869-6800
Fax: (661) 323-7618

WHAT BILLS MAY I RECEIVE?

In addition to your bill from this facility, you will receive bills from the physician(s) who treated you. If you were treated in the emergency room, the emergency room physician will bill for his or her services through a separate billing agency. You may also be billed separately for other professional services such as interpretations of diagnostic imaging (X-rays) and pathology. Listed below are the medical providers who render these services at our facility. These physician groups may or may not be contracted with the same health plans as the hospital.

Bakersfield Pathology Medical Group
3000 Sillect Avenue
Bakersfield, CA 93308
(661) 336-0622

Valley Anesthesia & Associates
2635 G Street
Bakersfield, CA 93301
(661) 633-1500

In addition, if you have had a surgery, the anesthesiologist will bill separately for services, as will other physicians your doctor may have asked to consult regarding your condition and treatment. The AIS Cancer Center and Outpatient Surgery Center do not provide or bill for these services, so please contact these other medical providers directly regarding your accounts with them.
If you do not have health insurance coverage, SJCH’s financial counselors are available to assist you in obtaining an application for Medi-Cal, Healthy Families or government coverage.

Please contact Patient Financial Services for an application. Adventist Health provides discounts to eligible low- to moderate-income patients. If you can’t pay part of your bill, please contact Patient Financial Services. We will review your financial situation to determine if you are eligible for financial assistance.
Sacred Work: It’s Who We Are

Every great organization has an identity, a purpose, a vision for who they want to be. For some, success is directly tied to the state of their bottom line. For others, true achievement is accomplished only when positively impacting the lives of those they serve.

At San Joaquin Community Hospital (SJCH), and The AIS Cancer Center/Outpatient Surgery Center our mission is defined by two words: Sacred Work. Sacred Work means treating every interaction – whether with a co-worker, patient or family member – as an opportunity to leave a lasting impression. It’s each staff member “living our values” of compassion, respect, quality, wholeness, integrity, stewardship and family – in every aspect of his or her job.

RECOGNIZING SACRED WORK IN ACTION
WITH A FOUNDATION DONATION

SJCH Foundation exists for the sole purpose of supporting the mission of the hospital and to invest the gifts from generous past patients and other community members in a positive way. Through the Foundation, SJCH has received the means to bring even more quality technology to the residents here, including Kern County’s first and only full-treatment burn center. And now, The AIS Cancer Center - Kern County’s first hospital-based comprehensive cancer center.

Were you blessed by one of our employees? Sacred Work is very much the giving of one’s heart – it is our honor to care for you or one of your loved ones. If you would like to honor your caregiver – or any staff member at SJCH – through a gift to the SJCH Foundation, you may do so through our Sacred Work in Action program. Learn more by calling the Foundation at (661) 869-6570 or go to: www.sjchgiving.org.

Sacred Work: It’s Who We Are

Quality

Compassion

Family

Stewardship

Respect

Integrity
Can you have an advocate? Do you need to sign a document so your advocate can get important information about your care?

What will be done to make sure you don’t get an infection?

Is there a form you need to sign about life-saving actions, like resuscitation?

Is there a form you need to sign about life support?

Does the organization allow members of your religion to visit and pray with you?

What kind of security does the facility have? Is there a 24-hour guard or alarm system?

Who do you speak to if a problem arises? How does the organization handle complaints?

Are there any procedures that cannot be done at this facility for religious reasons?

Can you get a copy of your medical records and test results?

Important Questions to Ask

QUESTIONS TO ASK BEFORE YOU ENTER THE HEALTH CARE FACILITY.
The following is a list of our most frequently called phone numbers; if you do not see a number listed, please call our main hospital operator at (661) 395-3000. For those who are hearing impaired, call (661) 323-7629.

### PATIENT CARE

**The AIS Cancer Center**  
(661) 323-HOPE (4673)

**Bariatric Solutions**  
Surgical Services  
(661) 869-6750

**Case Management**  
(661) 869-6526

**Chaplain Services**  
(661) 869-6629

**Children’s Mobile Immunizations Program**  
(661) 869-6740

**Emergency Department**  
(661) 869-6200

**Grossman Burn Center**  
The Aera Clinic:  
(661) 869-6130  
Inpatient Burn Unit:  
(661) 869-6135

**Home Care Services**  
(661) 869-6700

**Maternity Care Center**  
(661) 869-6430

**The Outpatient Surgery Center**  
(661) 322-SURG (7874)

**Palliative Care**  
(661) 869-6627

**Quest Imaging**  
(661) 633-5000

**Radiology**  
(661) 869-6260

### BUSINESS OFFICES

**The Wellness Center**  
(661) 869-6580

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(661) 869-6580

**Bariatric Solutions**  
Surgical Services  
(661) 869-6750

**Case Management**  
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*For Emergencies, please call 911.*
Parking lot information:
1 - Visitor/Patient Parking (free valet available)
2 - Highgrove Parking
3 - SJCH Employee Parking
4 - Highgrove Parking
5 - Visitor/Employee Parking Garage
6 - Visitor/Patient Parking
7 - Visitor/Employee Parking Garage
8 - Physician Parking
9 - Kaiser/Patients Parking Only
10 - AIS Cancer Center and Outpatient Surgery Parking

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Bakersfield, CA 93301
The AIS Cancer Center
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The Outpatient Surgery Center
(661) 322-SURG (7874)
www.sjch.us