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# Mission Statement

Commonwealth Health Corporation's mission is to care for people and improve the quality of life in the communities we serve. The Medical Center at Franklin's mission is the same...care for people and improve the quality of life in this community.

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# Welcome

The doctors, nurses, and staff of The Medical Center at Franklin extend to you our warmest welcome. We are dedicated to providing you with the best possible care along with insuring you a comfortable stay.

This booklet has been prepared to provide you information about our policies, operations and facilities. If you have any questions concerning our hospital and its services, any member of the staff will be happy to assist you.

## Hospital Medical Services

The Medical Center at Franklin is a 25 bed critical access hospital which has served the people of Simpson County and surrounding areas since 1968. The hospital provides the following services:

- Medical  
Wound Care  
Restorative Care  
Telemetry
- Surgical  
Inpatient Surgery  
Outpatient Surgery
- Emergency Room
- Physical Therapy  
Occupational  
Therapy  
Speech Therapy
- Pharmacy
- Respiratory Therapy  
Cardiac  
Rehabilitation  
Echocardiography  
Pulmonary Function  
Pulmonary  
Rehabilitation
- Laboratory  
Clinical  
Pathological
- Radiology  
Diagnostic X-ray  
CT Scan  
Ultrasound  
Nuclear Medicine  
Mammography  
Bone Density  
MRI
- Nutritional Services
- Community and  
Corporate Wellness  
Programs

## Tobacco Products Policy Statement

It is our intent to provide and promote a safe and healthy environment for all employees, patients and visitors. Use of tobacco products is dangerous to your health and to the health of employees, patients and visitors. Beginning January 1, 2004, the use of tobacco products by employees, students/interns, allied health professionals, volunteers, contract personnel, medical staff, vendors, patients and visitors is prohibited both inside and outside the facility. Tobacco products include cigarettes, cigars, chewing tobacco and the like.

The success of this policy depends upon the thoughtfulness, consideration, and cooperation of smokers and non-smokers. All share in the responsibility for adhering to and enforcing this policy.

# Admission

It is the policy of The Medical Center at Franklin to provide treatment and care to all persons without regard to sex, race, color, religion, creed, national origin, or disability.

For your convenience, we have made the admission procedure as simple as possible. At the time you are admitted, necessary information will be requested for the completion of your medical and financial records. You will be asked to sign a consent for medical treatment and to provide proof of hospitalization insurance. All collected information is strictly confidential.

## Preadmission Program

In order to answer any questions upon your admission to the hospital and eliminate some possible waiting time, we have a preadmission program. One or two days prior to your admission you may come by the hospital and give the required admission information to the admission clerk. At this time you may also take care of any pre-surgery teaching, lab or radiology work. When the time comes for you to be admitted, just stop by the admissions clerk.

## Financial Arrangements

### *Hospital Insurance*

Your medical insurance is a contract between you and your insurance company, whether private insurance or through a group program with your employer. The hospital allows a reasonable amount of time from the date of billing for payment by your insurance company. Any money due from the insurance company that is not paid within a reasonable amount of time will become your responsibility.

Any questions regarding insurance coverage or payment arrangements should be directed to the business department.

### *Physician Fees*

Your hospital bill does not include your attending physician's fees, consulting physician's fees, nor the fees of certain hospital-based specialists, such as a radiologist, pathologist, or emergency room physician. You will be billed separately by the individual physician.

# Visitors

## *Medical, Outpatient, and Surgical Patients*

- Each patient (or support person, where appropriate) has the right to receive visitors whom he or she designates, including, but not limited to, a spouse, domestic partner (including a same-sex domestic partner), another family member, or a friend, and his or her right to withdraw or deny such consent at any time.

# Mail, Flowers, Telephones, Television

## *Mail and Flowers*

Mail and flowers addressed to you will be delivered to your room daily. All mail arriving after your discharge will be forwarded to your home address on file in the Business Office.

## *Telephones*

Telephones are available in all patient rooms. Local calls may be placed at no additional charge by dialing “9” then the number. For a long distance operator, dial “9” plus “0.” The hospital does not handle billing for long distance calls.

## *Television*

All patient rooms are equipped with colored television sets with access to local cable. This service is free for your enjoyment.

# Clergy and Chapel

## *Clergy*

A hospital chaplain is available on call. If you would like for your minister or the chaplain on call to visit you, please ask your nurse.

## *Chapel*

The chapel is located off the main inpatient corridor. This room is always open for prayer, solitude, and meditation.

# Food and Nutrition Service

Your diet is an important part of your treatment and therapy and is prescribed by your physician. A Registered Dietitian is available for consultation with patients. For special diets, the dietitian will consult with you to explain your diet. Visitors should check with the nurse before bringing any food to a patient, since a special diet may have been ordered by the physician.

For visitors and guests, vending machines are located in the canteen. The hospital does not have a cafeteria but guest trays are available at meal times for a small charge, payable at the switchboard. Please place your order with the nurse at least an hour before lunch time.

## Going Home

There are three easy steps in your hospital discharge:

- Your physician will write a discharge order on your chart.
- A discharge order will be issued to you from the Nursing Station. Please do not leave your room without the discharge order. Discharge instructions will also be given to you at the time of discharge along with any prescriptions ordered by your physician.
- You will be taken by wheelchair or escorted to the entrance of the hospital where a relative or friend may pick you up.

### *Best Wishes*

It is our pleasure to serve you as our patient and guest. Best wishes to you and your health!

# **The Medical Center at Franklin Rights And Responsibilities Of Patients**

The mission and philosophy of The Medical Center at Franklin, it's Governing Body and Medical Staff provide for the patient's right to independence of expression, decision and action. The Medical Center at Franklin makes every effort to ensure that its employees respect the rights of all patients.

In addition, we recognize that each patient is an individual with special health care needs. We recognize the importance of respecting each patient's personal dignity and privacy and we provide considerate, respectful care which focuses on individual patient needs. We inform patients of their rights and responsibilities and assist the patient in the exercise of their rights.

The staff of The Medical Center at Franklin respects the basic rights of all human beings. These rights include the patient's independence of expression, decision, and action. Concern for the patient's personal dignity and human relationships is always of great importance to our staff. The recognition of the rights and concerns has led to the hospital's adoption of the following statements of patient rights and responsibilities:

## ***PATIENT RIGHTS:***

1. Individuals shall be accorded impartial access to treatment or accommodations that are available or medically indicated, regardless of race, creed, sex, national origin, religion, or sources of payment. The patient has a right to care, subject to the hospital's capability, mission, and applicable law and regulation. If a patient's critical needs cannot be met here, The Medical Center at Franklin will arrange appropriate transfer.
2. The patient has a right to have cultural, psychosocial, spiritual, and personal values, beliefs, and preferences respected.
3. The patient has the right to considerate, respectful care at all times and under all circumstances, with recognition of his personal dignity.
4. The patient has a right to access, request amendment to, and receive an accounting of disclosures regarding his or her own health information permitted under law.
5. The patient has the right, within the law, to personal and informational privacy, as manifested by the right to:

- A. Refuse to talk with or see anyone not officially connected with the hospital including visitors or persons officially connected with the hospital but not directly involved in his/her care.
  - B. To wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures of treatment of the patient or other patients.
  - C. Be interviewed and examined in surroundings designed to assure reasonable audiovisual privacy. This includes the right to have a person of one's own sex present during certain parts of a physical examination, treatment, or procedure performed by a health professional of the opposite sex and the right not to remain disrobed any longer than is required for accomplishing the medical purpose for which the patient was asked to disrobe.
  - D. Expect that any discussion or consultation involving his case will be conducted discreetly, and that individuals not directly involved in his care will not be present without his permission.
  - E. Expect all communications and other records pertaining to his care, including the source of payment for treatment, to be treated as confidential.
  - F. Request a transfer to another room if another patient or visitors in that room are unreasonably disturbing.
  - G. Be placed in protective privacy when considered necessary for personal safety.
  - H. To have his/her medical record read only by individuals directly involved in his treatment or in the monitoring of its quality. Other individuals can only read his/her medical record on written authorization of the patient or legally authorized representative.
- 6. The patient has the right to expect reasonable safety in so far as the hospital practices and environment are concerned.
  - 7. The patient has a right to an environment that preserves dignity and contributes to a positive self-image.
  - 8. The patient has the right to know the identity and professional status of individuals providing service to him/her and to know which physician or other practitioner is primarily responsible for their care. This includes the patient's right to know of the existence of any professional relationship to any other health care or educational institutions involved in his/her care. Participation by patients in clinical training programs or in the gathering of data for research purposes should be voluntary.

9. The patient has the right to obtain from the practitioner responsible for coordinating his care, complete and current information concerning his diagnosis (to the degree known), treatment, and any known prognosis and should be communicated to the patient in terms they can reasonably be expected to understand. When it is not advisable to give such information to the patient, the information should be made available to a legally authorized individual or a surrogate decision maker. This includes the patient's rights to education and information about his/her disease.
10. The patient has the right of access to people outside the hospital by means of visitors and by verbal and written communications. When the patient does not speak or understand the predominant language of the community, he/she should have access to an interpreter.
11. The patient has the right to reasonable informed participation in decisions involving his/her health care. Patients and when appropriate, their families are informed about the outcomes of care, including unanticipated outcomes. To the degree possible, this should be based on a clear, concise explanation of his/her condition and of all proposed technical procedures, including the possibilities of any risk of mortality or serious side effects, problems related to recuperation, and probability of success. The information is tailored to the patient's age, language, and ability to understand. The patient should not be subjected to any procedure without his voluntary, competent, and understanding consent or the consent of his legally authorized representative. Where medically significant alternatives for care or treatment exist, the patient shall be so informed. Before any investigational studies or clinical trials are conducted in this hospital, an informed consent will be obtained from the patient; the patient has the right to refuse to participate in any such activity.
12. The patient, at his/her own request and expense, has the right to consult with a specialist.
13. The patient has a right to refuse any procedure, medication, treatment and/or restraint or may refuse to be seen by a particular physician. A patient may sign out of the hospital "against medical advice" prior to discharge by a physician. When refusal of treatment by the patient or his/her legally authorized representative prevents the provision of appropriate care in accordance with ethical and professional standards, the relationship with the patient may be terminated upon reasonable notice. The patient has a right to accept or refuse medical or surgical treatment, including forgoing or withdrawing life-sustaining treatment or withholding resuscitative services in accordance with the law and regulation.

14. The patient has the right to an Advance Directive in accordance with applicable Federal and State laws and to expect that his/her wishes will be carried out.
15. A patient may not be transferred to another facility or organization unless he has received a complete explanation of the need for the transfer and of the alternatives to such a transfer and unless the transfer is acceptable to the other facility or organization. The patient has the right to be informed by the practitioner responsible for his/her care, or delegate, of any continuing health care requirements following discharge from the hospital.
16. All patients have the right to request a discharge plan.
17. Regardless of the source of payment for care, the patient has the right to request and receive an itemized and detailed explanation of the total bill for services and receive an itemized and detailed explanation of the total bill for services rendered in the hospital. The patient has the right to timely notice prior to termination of his eligibility for reimbursement by any third-party payer for the cost of his/her care.
18. The patient should be informed of the hospital rules and regulations applicable to conduct as a patient. Patients are provided mechanisms that provide for the consideration of other patient needs including resolution of complaints. A patient, family member or guest wishing to state a complaint regarding any aspect of our facility may make their concern known by either contacting the hospital's Customer Satisfaction Coordinator, calling the hospital's administrative staff, or writing a letter of complaint. The patient may file a complaint by calling the Cabinet for Health and Family Services (Healthcare Facilities and Services) at 270-889-6052.
19. If an individual has any concerns about patient care and safety that have not been addressed, the individual is encouraged to contact hospital administration at 270-598-4800 (The Medical Center at Franklin). If those concerns cannot be resolved, the individual may contact The Joint Commission's Office of Quality Monitoring at 1-800-994-6610.
20. The patient or his/her legally authorized representative has the right to appeal conflicts in deciding difficult health care issues to the hospital Ethics Committee for their recommendations and help.
21. The patient has the right to effect communication. Special arrangements will be made, whenever possible, to accommodate our patients with special needs. For example, TDD machines and other adaptive equipment are available for our deaf patients. Interpreters can be ar-

ranged for any patient who does not speak English. Staff will help with any arrangements of service dogs.

22. Patients have a right to personal privacy. It is the duty of all hospital staff to support and maintain that right. This is accomplished by:
  - A. Honoring the patient's request to have the door closed.
  - B. Assuring that the patient is wearing appropriate clothing.
  - C. Avoiding, when possible, transporting patient through areas where there are visitors.
  - D. Using appropriate privacy curtains, screens or drapes around patient when in an area where there are other patients and/or visitors.
23. The patient has a right to be free from mental, physical, sexual, and verbal abuse, neglect or exploitation.
24. The patient has a right to appropriate assessment and management of pain, information about pain and pain relief measures, a concerned staff committed to pain prevention and management, health professionals who respond quickly to reports of pain, and expect that reports of pain will be believed.
25. The care, treatment, and services for patients are not negatively affected when the hospital grants a staff member's request to be excused from participating in an aspect of the care, treatment, and services.
26. All patients have the right to be free from physical or mental abuse, and corporal punishment. All patients have a right to be free from restraint or seclusion, of any form, imposed by staff as a means of coercion, discipline, convenience, or retaliation. Restraint or seclusion may only be imposed to ensure the immediate physical safety of the patient, staff, or others and must be discontinued at the earliest possible time.
27. The rights hereinabove described are guaranteed and extended to the parent and/or guardian of adolescent, infant, and neonatal patients of this hospital and/or legal representative of any patient.

QUESTIONS OR CONCERNS REGARDING YOUR PATIENT RIGHTS MAY BE REFERRED TO THE SOCIAL SERVICES DEPARTMENT AT EXTENSION 4850 OR A MESSAGE LEFT ON THE HOSPITAL HOT LINE, EXTENSION 5000.PATIENT RESPONSIBILITIES:

***PATIENT RESPONSIBILITIES:***

1. A patient has the responsibility to provide, to the best of his/her knowledge, accurate and complete information about present com-

plaints, past illnesses, hospitalizations, medications, and other matters relating to health. He/she has the responsibility to report unexpected changes in condition to the responsible practitioner. A patient is responsible for making it known whether he/she clearly comprehends a contemplated course of action and what is expected. A patient with special needs (such as a deaf, blind, or non-English speaking patient) is responsible for doing what they can to alert staff to those needs.

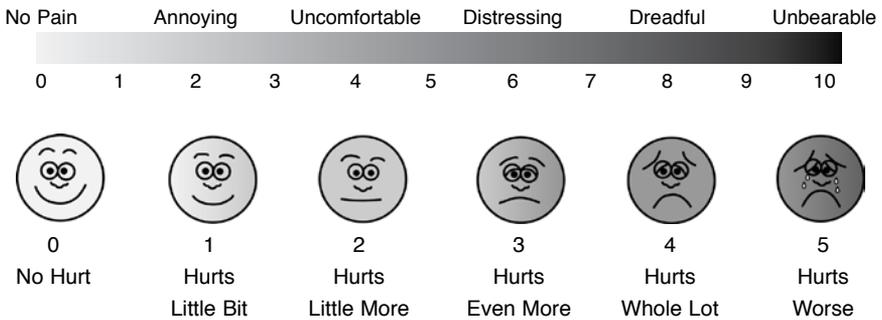
2. A patient is responsible for following the treatment plan recommended by the practitioner primarily responsible for his/her care. This may include following instructions of nurses and allied health personnel as they carry out the coordinated plan of care and implement the responsible practitioner's orders, and as they enforce the applicable hospital rules and regulations. The patient is responsible for keeping appointments and, when he/she is unable to do so for any reason, for notifying the responsible practitioner or the hospital.
  3. The patient is responsible for his actions if he refuses treatment or does not follow the practitioner's instructions.
  4. The patient is responsible for assuring that the financial obligations of his/her health care are fulfilled as promptly as possible.
  5. The patient is responsible for being considerate of the rights of other patients and hospital personnel and for assisting in the control of noise and the number of visitors. The patient is responsible for being respectful of the property of other persons and of the hospital.
  6. The patient is responsible for following hospital rules and regulations affecting patient care and conduct.
  7. The patient has a responsibility to ask your doctor or nurse what to expect regarding pain and pain management, discuss pain relief options with your doctors and nurses, work with your doctor and nurse to develop a pain management plan, ask for pain relief when pain first begins, tell your doctor or nurse if your pain is not relieved, tell your doctor or nurse any concerns you have about taking pain medication.
  8. The responsibilities hereinabove described are also guaranteed and extended to the parent and/or guardian of adolescent, infant and neonatal patients of this hospital.
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We at The Medical Center at Franklin wish to remind you and your family that hand washing or cleansing with a waterless product is the most important step to take to prevent the spread of infection. Please wash or cleanse your own hands whenever needed and remind your caregiver to do the same.

# Patient and Family Education for Pain

- Keeping pain under control is important to your well being. Pain can affect your healing, appetite, sleep, and the ability to do things.
- The staff wants to know if you are having pain or discomfort.
- It is important to keep pain from becoming severe. Please tell someone, such as your nurse, if you are in pain.
- If pain is not relieved by medication, please tell your nurse.
- If you notice anything out of the ordinary after you take your medicine, please tell your nurse.
- Pain medications, when given with supervision, are safe and effective. Strong medicines are rarely addictive when given in this manner.
- It may be impossible for us to make you “pain free,” but working together, we can make you more comfortable.
- These pain scales, below, will be used to report your pain.

## PAIN SCALES (Adjective, Color, Number, Wong Baker)



# Advance Directives

## *What is an Advance Directive?*

Advance Directives are documents which state your choices about medical treatment or, if you are unable to make these decisions, name someone to make decisions about your medical treatment. Kentucky law recognizes three types of Advance Directives:

1. A Health Care Declaration (Living Will)
2. Living Will with a Designation of a Health Care Surrogate
3. A Durable Power of Attorney for Health Care

## *What is a Living Will?*

A living will is a document which tells your doctor or other health care providers whether or not you want life prolonging treatments or procedures administered to you when you have a terminal condition (without decisional capacity) or are permanently unconscious. A living will goes into effect when your physician has a copy of it, when your physician has determined you are suffering from a terminal condition and are unable to make decisions or are permanently unconscious, and when the use of life prolonging procedures will only prolong your death.

## *What are Life Prolonging Procedures?*

These are treatments or procedures that do not make you better. They prolong dying. Examples are mechanical respirators which help you breathe and Cardiopulmonary Resuscitation (CPR) which restores your heartbeat, or artificially provided nutrition and hydration.

## *What is a Health Care Surrogate?*

A Health Care Surrogate can include a parent, child, friend, domestic partner, etc., and is a person you choose to make decisions about your medical treatment. If your physician determines you have a terminal condition and that you are unable to make these decisions or are permanently unconscious, your Health Care Surrogate will decide whether or not to use life prolonging treatments. Under Kentucky law, if a healthcare surrogate resigns, is unavailable, or refuses to make a decision, the doctor proceeds as if no surrogate exists. If a healthcare surrogate does not exist, someone must be chosen to make decisions for the patient.

The decisions should be obtained by the following family members, in the order listed below:

1. Guardian appointed by a court
2. Spouse
3. Adult children over 18 years of age
4. Parents
5. Next available relative

***What is a Durable Power of Attorney?***

A Durable Power of Attorney is a person designated to make healthcare decisions as well as personal and financial decisions for you. This document should be drafted by an attorney.

***Do I have to have an Advance Directive?***

No, it is entirely up to you. However, if you are unable to make your own choices, advance directives can help solve important issues.

***Does Advance Directives apply if a woman is pregnant?***

No, an Advance Directive does not apply during pregnancy.

We have provided this information so that you may make decisions concerning advance directives before a terminal condition or permanent unconsciousness occurs. If you have made a living will or signed a power of attorney or designation about healthcare matters, you should provide the hospital with a copy each time you register. We recommend you discuss this matter with your physician and attorney. For additional information, please contact your nurse.

# AIDS And You

*This organization provides quality services to ALL patients, regardless of HIV status. The source of the following information is the Kentucky Cabinet for Health Services.*

## ***What Does AIDS Mean To You?***

AIDS stands for *acquired immune deficiency syndrome*. It is a disease caused by a virus that can destroy the body's ability to fight off illness. The AIDS virus makes you unable to fight other diseases that invade your body. These diseases can kill you.

There is presently no cure for AIDS.

Many people feel that only certain "high risk groups" are infected by the AIDS virus. This is untrue. *Who you are has nothing to do with whether you are in danger of being infected with the AIDS virus. What matters is what you do.*

Regardless of what you may have heard, the AIDS virus is easily avoided. You can't get it through casual contact in school, in the workplace, at parties, in resident facilities and resident camps, child care centers, stores, or by going swimming in a pool where a person with AIDS or one who has been infected by the AIDS virus has been swimming.

You also won't get it from the towels in a locker room, or the shower, or the whirlpool, or by using exercise equipment. It won't be passed through a glass or eating utensils. Nor do you have to worry about shaking hands, hugging, or being in a crowded elevator with a person who is infected with the virus.

No one has ever gotten the AIDS virus from a mosquito or any other insect bite, or from a toilet seat, urine, excrement, sweat, saliva, or even from a kiss.

There are actually very few ways you can be infected by the AIDS virus. It is transmitted through semen, vaginal secretions, and blood. Therefore, you can become infected by having sex with an infected person, or by using drugs and sharing a needle and syringe.

Babies of women who have been infected with the AIDS virus may be born with the infection because it can be transmitted from the mother's blood to the baby before or during birth.

People with hemophilia and others have been infected by receiving blood or blood products.

## ***What About Giving And Receiving Blood?***

**1. Giving blood.** You are not now, nor have you ever been, in danger of getting AIDS from giving blood at a blood bank. The needles that are used for blood donations are brand-new. Once they are used, they are destroyed. There is no way you can come into contact with the AIDS virus by donating blood.

**2. Receiving blood.** Some people were infected with the AIDS virus by getting blood transfusions prior to 1985, before the virus was identified. Today, all donated blood in the U.S. is tested to make it as safe as possible for those who need it. Call your local blood bank if you have any questions.

## ***Can Anyone Be Infected With The AIDS Virus?***

Yes. The homosexual population was the first to be infected by the disease in this country. But no matter what you've heard or read, the number of heterosexual cases is growing.

The people who have died of AIDS in this country have been male and female, rich and poor, white, black, Hispanic, Asian, and American Indian.

## ***How Do You Avoid AIDS?***

Keeping yourself safe from AIDS is relatively easy. You have to avoid sex with anyone who is infected with the virus, and never share needles and syringes.

The only safe sex practices are abstinence (not having sex with another person) or a mutually faithful, monogamous relationship with an uninfected partner. This means that the two sexual partners do not have sexual relations with anyone else and neither has another risk factor such as injecting (IV) drug use.

There is no way to tell if someone is infected with the virus without a blood test. If you have sex with someone infected with the virus, you are at risk of becoming infected.

Condoms with a spermicide are the best means now available for preventing sexual transmission for those who do not practice abstinence and have not formed a mutually faithful, monogamous relationship with an uninfected partner.

If you are giving first aid to someone who is bleeding, you may want to wear rubber gloves, if they are available, to avoid direct contact with blood. If blood does get on your skin, simply wash it off with soap and water.

## ***What If You Think You Might Have The AIDS Virus?***

You have probably heard about the “AIDS Test.” The test doesn’t actually tell you if you have AIDS. It shows if you have been infected with the virus. The test looks for changes in the blood that occur after you have been infected with the virus.

The Public Health Service recommends that you should be counseled and tested if, since 1978, you have had any sexually transmitted disease or have shared needles for injecting drugs; if you are a man who has had sex with another man; or if you have had sex with a prostitute, male or female. You should also be tested if you have had sex with anyone who has done any of these things.

If you are a woman who has been engaging in risky behavior and you plan to have a baby or are not using birth control, you should be tested. Your doctor may advise you to be tested if you received a blood transfusion between 1978 and 1985.

There’s been a great deal in the press about problems with the test. It is very reliable if it is performed by a good laboratory and the results are interpreted by a knowledgeable physician or counselor. It can also be done confidentially.

If you have engaged in risky behavior, speak frankly to a doctor who understands the AIDS problem, or to an AIDS counselor.

## ***It’s Not Easy To Become Infected With The AIDS Virus***

The AIDS virus can only be transmitted in certain ways. You cannot get the disease from the pool, locker room, exercise equipment, or from any kind of casual, everyday contact. You may become infected if you

- Have sex with someone infected with the AIDS virus.
- Use a needle and syringe that have previously been used by someone with the AIDS virus.
- Are born to a woman who is infected with the AIDS virus.

## ***Would You Like More Information?***

If you’d like to know more about AIDS, talk to your doctor, local health department, or hospital. In addition, you can get helpful, confidential information from the National AIDS hotline, 1-800-342-AIDS. It’s open 24 hours a day. The Spanish hotline is 1-800-344-SIDA (1-800-344-7432). The Kentucky HIV/AIDS Program number is 502-564-6539. You can also call your local Health Department’s AIDS Coordinator.

# Smoking Cessation Information

The US Surgeon General has stated, “Smoking cessation (stopping smoking) represents the single most important step that smokers can take to enhance the length and quality of their lives.” Smoking cigarettes tops the list of major risk factors of our number one killer—heart and blood vessel disease. In fact, almost one-fifth of deaths from heart disease are caused by smoking. Smoking also harms thousands of nonsmokers who are exposed to cigarette smoke, including infants and children.

No matter how much or how long you’ve smoked, when you quit smoking, your risk of heart disease and stroke starts to drop. In time, your risk will be about the same as if you’d never smoked!

Quitting cigarettes or other tobacco products can be hard to do. One reason is that nicotine in tobacco is habit-forming or addictive. Fortunately, the nicotine habit can be broken. The first step is to decide you will quit. A good next step is to talk with your physician. Counseling and nicotine replacement products have proven effective in quitting smoking. Your physician can help determine the best treatment plan for you.

While you are in the hospital, if you would like more information regarding stopping smoking, you may speak to your nurse. These resources are also available as a source for current information.

The Medical Center’s Health & Wellness Center  
Greenwood Mall, Bowling Green, KY  
(270) 745–0942 or Toll Free (877) 800–3824

American Cancer Society  
(800) ACS 2345  
[www.cancer.org](http://www.cancer.org)

National Cancer Institute  
(800) 4 CANCEER  
[www.cancer.gov](http://www.cancer.gov)

American Heart Association  
(800) AHA USA1  
[www.americanheart.org](http://www.americanheart.org)

Office on Smoking and Health  
Centers for Disease Control and  
Prevention  
(800) CDC 1311  
[www.cdc.gov/tobacco](http://www.cdc.gov/tobacco)

American Lung Association  
(800) LUNG USA  
[www.lungusa.org](http://www.lungusa.org)

# Questions & Answers

## Regarding Your Statement of Account

### ***Question***

*“Will The Medical Center at Franklin statement of account include all my charges?”*

### ***Answer***

Your statement from The Medical Center at Franklin will only include charges from the hospital. Some professional services rendered during your hospital stay or visit will be provided by physicians who are independent practitioners and are not employees of The Medical Center at Franklin. These physicians will submit a separate statement to you for any services provided by them during your stay.

These services include the following:

1. SPRINGFIELD RADIOLOGY ASSOCIATES  
(931) 647-5034 or 800-391-1392  
P.O. Box 371863  
Pittsburgh, PA 15250-7863
2. ANESTHESIOLOGY (1-800-919-1190 or 270-393-1912)  
Anesthesia and Pain Specialists of Bowling Green  
350 Park Street, Suite 203B  
Bowling Green, KY 42101
3. PATHOLOGY (800-948-3440)  
Pathology Service Associates  
P.O. Box 52990  
Greenwood, SC 29649-2990
4. EMERGENCY (888-952-6772)  
SE Emergency Physicians  
P.O. Box 630707  
Cincinnati, OH 45263

**Question**

*“Who can I talk to about my Medical Center statement of account?”*

**Answer**

All questions regarding your statement should be directed to Commonwealth Financial Resources at 270-745-1100. If you have any questions regarding financial assistance, a counselor is available during your hospital stay and can be reached at 270-598-4809.

**Question**

*“What about my insurance?”*

**Answer**

The Medical Center at Franklin accepts assignment from all insurance carriers and will courtesy bill your insurance. However, you are responsible for any costs your insurance does not pay. The Commonwealth Financial Resources staff will work closely with you and your insurance company.

**Question**

*“What about Medicare?”*

**Answer**

The Medical Center at Franklin is an approved Medicare provider and accepts assignment. The Medical Center at Franklin will courtesy bill all supplements; however, any non-covered charges or deductibles will be your responsibility.

**Question**

*“Where or how should I pay?”*

**Answer**

Payments should be made at the time of service or discharge unless other payment arrangements are established.

Commonwealth Financial Resources processes all patient accounts for The Medical Center at Franklin. All inquiries regarding your account should be directed to Commonwealth Financial Resources at 270-745-1100 or you may visit their office at the Reservoir Park Professional Building located at 800 Park Street, P.O. Box 90010, Bowling Green, KY 42102-9010. Patient Registration will accept payments on accounts. However, if you have further questions about your statement of account, please contact Commonwealth Financial Resources.

A return envelope will be included with your statement for your convenience in remitting payment. All payments by mail should be made payable to:

The Medical Center at Franklin  
1100 Brookhaven, Franklin, KY 42134



