

Patient Information Guide



MARSHALL
MEDICAL CENTER

It's about you

www.marshallmedical.org



Welcome to Marshall Hospital

Our goal is to provide you with excellent care in a calm, healing environment. Your comfort and safety are our highest priorities. This guide was designed to give you information you need for your stay.

If you have any questions about our services, policies or other information in this guide, please ask any member of your care team.

Thank you for choosing Marshall for your healthcare needs.

Cindy Rice, MSN
Chief Nursing Officer

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NOTES

Questions for my physician or nurse



To Ensure Your Safety

- Each day, patients, visitors, staff, and providers are screened for COVID-19 symptoms before entering the hospital or a clinic building.
- Staff and providers with direct patient care interaction wear the recommended personal protective equipment.
- Heightened precautions for sanitizing all patient care and public areas are in effect.

A Quick Guide for Your Visit



Important Phone Numbers

Marshall Hospital.....	530-622-1441
Chaplain.....	530-626-2756
Food Services	530-626-2755
Patient Advocate.....	530-344-5428
Lost & Found.....	530-626-2770, x6015
Social Work.....	530-626-2633
Golden Club (Seniors)	530-642-9984

Making Phone Calls - For local calls, dial “9” and then the phone number. For long distance calls, dial “0.” Cell phones can be used in most of the patient rooms but cannot be used in the Emergency Room, ICU, or Surgery Areas.

Wireless Internet Services - Wi-Fi services are available throughout the hospital, including in your room.

Patient Meals - You will be visited daily and will be assisted to select your food. If you have a special request you may ask your nurse or call extension 2755.

Visitors Meals - The Marshall Hospital Café is open seven days a week, from 7 a.m. to 7:30 p.m. Freshly-prepared hot food is available for breakfast from 7 to 9:30 a.m., lunch from 11 a.m. to 2:30 p.m., and dinner from 4:30 to 7:30 p.m.

Visiting Hours - On the Medical and Surgical floors, visiting hours are typically from noon to 9 p.m.

Special care units have individualized visiting hours. Visitors should be at least 12 years of age (except for siblings of a newborn in the Birth Center). Only 1-2 visitors should be at the patient bedside at any given time and stay only a short period (15-30 minutes) if you have a roommate.

Gift Shop - Gift items, fresh flowers, stationery, snacks and toiletry items are available in the Hospital Gift Shop. Store hours are from 9 a.m. to 5 p.m. on weekdays and from noon to 4 p.m. on weekends.

Balloons - Due to its potential to trigger allergic reactions, latex rubber balloons are not permitted in the hospital. Mylar balloons are allowed.

Lost and Found - Lost items are taken to the Security Department where they are kept for 30 days. After this, appropriate items are given to a local charity. Please call 530-626-2770, x6015 for assistance.

Marshall is Smoke-Free - We support a healthy, smoke-free environment for our patients and visitors. Smoking including the use of e-cigarettes, is not permitted by patients or visitors on Marshall property.

Communication - We encourage questions and want to know if there is anything we can do make your stay more comfortable.

Senior Citizens /Golden Club - Free in-room meals for a spouse who is visiting you. See page 13 for details.

TV CHANNEL GUIDE



Channel	Station
2	Medical Channel
3	NBC 03
4	ABC 10
5	Encore Family
6	Cooking
7	Hallmark
8	Fox 40
9	CBS 13
10	ID Network
11	FX
12	Hallmark Movies & Mysteries
13	National Geographic
14	Grit TV
15	ESPN
16	AMC
17	Cartoon Network
18	Fox News
19	Galavision (Spanish)
20	LAFF
21	Nick
60	Marshall TV

Your Room & Comfort

Rooms are assigned based on the kind of medical care you need, infection control principles, and room availability. Your room is equipped for comfort and safety. Nursing staff will show you how to use the following equipment:

- **Bed** - Each bed has an adjustable head and knee function. The bed will be kept in the lowest position with wheels locked for safety. Keeping the side rails up is advised.
- **Call button** - Ring the main station and a clerk or appropriate care provider will assist you.
- **Bathroom emergency bell** - Ring if you need assistance while in the bathroom.
- **Telephone** - For local calls in the 530 area code, dial "9" and the telephone number. For long distance dial "0" to reach the hospital operator.
- **Cellular phones** are permitted in patient rooms. However, out of respect for other patients and to encourage an atmosphere of healing, please keep cell phones in silent or vibrate mode. We also encourage the use of texting whenever possible so as not to disturb other patients who are trying to rest.
- **Television** - As a courtesy to your roommate, please use ear phones when watching television. Ear phones are available for your use.

Please discuss with your caregivers whether or not you should get out of bed without assistance.

Most inpatient rooms accommodate two patients with a shared bathroom. There is a common shower available on each patient unit, for those patients whose medical condition allows.

Patient room assignment may be changed during your hospital stay in response to safety needs including changes in patient condition.



We depend on you and your loved ones to tell us about how you're feeling. Ask questions as often as you need to. Write down concerns as you think of them.



Personal Items and Valuables

Please leave valuables such as cash, jewelry and electronics at home. Any valuables that you cannot send home should be stored in the hospital safe. The hospital is not responsible for lost or stolen items. Please send the following items home: medications, vitamins, and personal electrical devices such as hair dryers.

What to Keep with You

- List of current prescriptions, over-the-counter medication, vitamins, and herbal supplements (not the medications themselves)
- List of any allergies
- Medical insurance cards and insurance forms
- Your advance directive
- Hearing aids and eye glasses – Keep in a case in the top drawer of your bedside table
- Dentures - Ask your nurse for a denture cup and keep it in your bedside table – away from your food tray or on the bed linen



Visitors

Marshall's visitor policy is subject to change due to COVID precautions.

On the Medical and Surgical floors, visiting hours are typically from noon to 9 p.m. Visitors should be at least 12 years old.

In the Birth Center, visitors for labor patients are welcome 24 hours a day. After delivery, visiting hours are from 9 a.m. to 9 p.m. and all ages are welcome. Please refrain from visiting if there are signs of illness (runny nose, cough, fever).

In the Intensive Care Unit, visiting is limited based on the patient's condition.

Only one to two visitors should be at the patient bedside at any given time and stay only a short period (no more than 15-30 minutes) if you have a roommate.

There are times when it is not appropriate for visitors to be at your bedside. These include circumstances when:

- A physician or care team member needs to speak privately



Shhh...

Silent Hospitals Help Healing

We want to provide the best healing environment for all of our patients. We ask that patients and visitors are aware of noise levels. To help with providing a quiet environment, lower conversational voices, turn cell phones to silent, and lower the TV volume, or use earphones. Our aim is to keep noises to a minimum so that patients can get the rest they need to heal. Please let us know if there is anything we can do to make your stay more restful.

- A procedure is being performed
- A roommate needs to use the bathroom, bedpan, or bedside commode

Due to space limitations and the need to keep rooms clear for potential emergencies, only one bedside chair per patient is kept in each room. Please do not remove chairs from room to room or use more than one chair per patient in double rooms.

Balloons and Flowers - Due to its potential to trigger allergic reactions, latex rubber balloons are not permitted in the hospital. Mylar balloons are allowed. Flowers received while you are a patient will be delivered to your room with the exception of ICU or if you are under protective (immunosuppression) precautions.



Always ask about any medicine you don't recognize before you take it.

Your Health & Safety

Patient Medication

A key element in safe medication use while in the hospital is careful communication between you, your physicians, nurses, and pharmacists. It is important that you share the following to help ensure medication safety during your stay.

- Provide a current list of all medicines, including non-prescription medicines as well as dietary and herbal supplements.

- Provide a complete list of allergies and the type of reaction you experienced. This includes food and other allergies.
- Explain how you actually take your medication, especially if this is different from the originally prescribed directions.

For your safety, your nurse will verify your identity and compare this with information on the medication record before medication is given to you. Your nurse will provide the following information regarding each of your medications the first time it is administered:

- Medicine name
- Why it is being given
- Possible side effects
- The dose or strength
- How often it will be given

Ask for information about your medicines in terms you can understand, including why you are taking them.

Things that you can do to ensure medication safety:

- Notify your nurse if you have any unexpected symptoms after taking a medication, especially if this is a new medicine for you.
- Make sure you have a special wristband stating you have an allergy. Let your nurse know right away if that wristband comes off.
- If you have any questions or concerns regarding your medication, a pharmacist is available to talk to you.
- Speak up if you have questions or concerns. If you don't understand something, it's ok to ask again. You and your family members play a vital role by becoming an active and informed member of your healthcare team.



Equipment Safety

It is likely that you'll use medical equipment such as an IV Pump and/or other equipment during your stay. If you are unsure if a device is working properly, press your call button to tell your nurse your concerns. Do not turn off alarms or attempt to change the settings on medical equipment. Do not allow family members to adjust settings on any medical equipment. For your safety do not leave the main hospital building with medical equipment.



Prevent infection by washing your hands or using hand sanitizer often. And don't hesitate to remind your care team members to do the same.

Preventing Infection

One of the best ways to prevent infections is to clean your hands and remind others to clean theirs, too. Use hand sanitizer gel or wash with soap and water after using the bathroom, before eating, or after touching anything that may be soiled.

Health care providers are required to wash or sanitize their hands before and after seeing a patient. They should wear gloves when they perform tasks such as drawing blood, touching wounds or handling bodily fluids. Don't hesitate to remind your care team members to clean their hands or wear gloves.

Preventing Injury and Falls

During your stay, you may need help moving around. Whether it's getting out of bed, using the toilet, or walking, we are here to provide assistance. If at any time you feel you need help, please call for your nurse. To ensure a safe environment, we may use special equipment to transfer you safely or to aid in your care. If a mechanical lift or transfer aide is necessary, a staff member will explain this to you.



Make sure your visitors wash or sanitize their hands before and after seeing you. If they are sick, please ask them to stay home or to leave.

Bacteria can spread in several ways and in some instances extra care to prevent the spread of infection is required. To help protect our patients, visitors, and our community, our staff may use gloves, masks, and gowns over their clothing. Visitors may be asked to do the same. A "Precaution" sign will be on the door if this protective equipment is necessary.

Medical equipment is cleaned between patients and each patient room undergoes a thorough disinfection and cleaning procedure between patients. Rooms and bathrooms are cleaned at least daily.

If you have any questions regarding infection control and safety practices at Marshall, speak with your nurse or ask to speak with the Infection Control Nurse.

Your Care & Treatment



Daily Routine

Mornings and early evenings are a busy time, when special procedures are scheduled, doctors make patient rounds, and the housekeeping staff come to tidy up rooms.

Most patients require early morning "fasting" lab draws and many are weighed each day in the early hours before breakfast arrival.

Nursing staff will assess and monitor your condition, take your vital signs, review your test results, communicate with your physician, provide indicated treatments and medications, and coordinate your care with other disciplines.

Care requirements continue throughout the night and many patients are admitted during late night

hours. We make every effort to keep the noise level to a minimum while continuing necessary care, treatment, and medication communication.

Physicians make patient rounds at least daily. The time of patient rounds depends on factors including patient condition, surgery schedule, office hours, and other emergencies. Keep a list of questions for your physician and if you don't understand something, don't hesitate to ask the physician to re-explain.

Special diagnostic tests may be needed during your stay. Some will occur in the morning and require special preparation, such as fasting the night before. Testing times will vary, and emergencies may need to take priority over a scheduled test. Results are provided directly to the physician, who will discuss the test results with you.



You need to understand your care plan. Don't hesitate to ask questions as many times as you need to.

Bedside Reports

To keep you better informed about your plan of care, tests and progress, your care team will participate in bedside reports. During a shift change, your current nurse will introduce your new nurse and communicate any updates or changes to your condition. We encourage you to be an active participant during this exchange.

In the event that you have visitors in your room at the time of the bedside report—or anytime you feel uncomfortable about any information being discussed—please let your nurses know and other arrangements will be made. If you are sleeping at the change of shift report, the nurses will update the whiteboard information. The verbal report will be done elsewhere to permit your continued rest, unless you have asked to be awoken for the report.

Bedside reports will benefit you by keeping you better informed of your condition. It also allows us to continue to maintain the high quality of care that you expect as a patient at Marshall Medical Center.



Advance Directives

An Advance Health Care Directive (AHCD) is a legal document allowing you to designate a Health Care Agent to make your health care decisions when you are unable to. This is also known as “Durable Power of Attorney for Health Care” or “Medical Power of Attorney”. It provides instructions about your medical care and expresses your choices when facing life prolonging and end of life decisions and care.

Why complete an AHCD?

An AHCD provides direction to family, friends and health care providers when you are unable to. It identifies who you trust to make decisions for you and allows health care professionals to speak openly to them.

When thinking about your wishes towards the end of life consider the following:

- Who do you trust to make decisions based on your wishes? Who can you have honest and open conversations with about end of life decisions?
- Would you want Cardiopulmonary Resuscitation (CPR) if your heart stops?
- Would you want to be put on a breathing machine (ventilator) to help you breathe if you could no longer breathe on your own? If yes, for how long?
- If you can no longer swallow, eat foods/drink fluids by mouth would you be okay with being fed by a tube and for how long?
- Would you want to take medications to treat serious infections or prolong your life?
- Would you want to donate your organs and/or body upon death?

What to do once you've completed your AHCD

Give copies to your designated Health Care Agent(s) and/or family, your health care provider(s), and hospitals. Keep originals with you and easily accessible.

Review your completed AHCD periodically or as your health condition changes.

You can change your decisions at any time. Ensure that new copies are distributed.

Where can you obtain AHCD forms or ask for assistance?

- Marshall Medical Center
- Senior Legal Services at 937 Spring Street, Placerville
- Personal attorney

Websites

- CA Hospital Association – www.calhospital.org
- Coalition for Compassionate Care for California – www.coalitionccc.org
- Five Wishes – www.agingwithdignity.org
- POLST California – www.capolst.org



Hospitalists

During your stay, you may be seen by physicians on our medical staff who are board certified in internal medicine and are experts in the care of hospitalized patients. Our hospitalists work full-time in the hospital, focusing solely on admitted patients. This additional time and focus can make a significant difference. Although you will likely speak with and receive care from more than one hospitalist during your stay, rest assured that they communicate closely with each other, the nursing staff, and ultimately with your regular physician as you become ready for discharge.



About Antibiotics

Antibiotics are medicines that treat or prevent infections caused by bacteria. Antibiotics are not effective in treating viral illnesses. Your healthcare team may start you on antibiotics if they think you might have an infection caused by bacteria. You may also need an antibiotic to prevent an infection after you have surgery or if your immune system doesn't work well. Some things your health care team thinks about before prescribing an antibiotic include:

- Type of infection
- Type of bacteria
- How well your liver and kidneys work
- Other medications you are taking
- Any antibiotic allergies you may have
- Potential side effects

Talk with your health care team to find out why you are receiving antibiotics and how you should take them.



Blood Thinners – Anticoagulants and Antiplatelets

Anticoagulants and antiplatelets are medicines that reduce blood clotting in an artery, vein or the heart. It is important to let all your healthcare providers know if you are taking a blood thinner. Different blood thinners can interact with some of the food you eat and other medications you take.

ANTICOAGULANTS include:

- Warfarin (Coumadin)
- Enoxaparin (Lovenox)
- Dabigatran (Pradaxa)
- Rivaroxaban (Xarelto)
- Apixaban (Eliquis)
- Edoxaban (Savaysa)

ANTIPLATELETS include:

- Clopidogrel (Plavix)
- Aspirin
- Extended Release Dipyridamole/Aspirin (Aggrenox)
- Cilostazol (Pletal)
- Prasugrel (Effient)
- Ticagrelor (Brilinta)

Serious bleeding is a rare side effect of blood thinners.

Common side effects include:

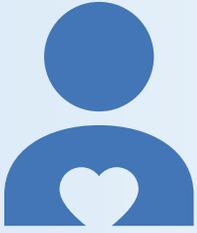
- Bruising
- Nosebleeds
- Bleeding from cuts that stops within 10 minutes
- Gums that bleed when brushing teeth

Because blood thinners may cause serious bleeding, it is important to know when to seek medical attention.

Go to the emergency room if you:

- Throw up blood or have vomit that looks like coffee grounds
- Have bleeding that will not stop
- Fall and hit your head
- Cough up blood
- Have pink or reddish-brown urine
- Have red or black stools that look like tar
- Have unusual headaches, dizziness, or weakness
- Are a female and have a heavier than normal menstrual cycle

It is important you take these medications as directed and to complete any laboratory testing that may be needed as part of your anticoagulation therapy.



Pain Management

We want to make you as comfortable as possible and reduce any pain you may have during your hospital stay. By managing your pain, you'll increase your comfort and promote healing. With less pain, you can increase your activity and strength.

You may be asked to rate your pain on a scale of 0 - 10, or you may choose words that best describe the pain.

Reporting your pain as a number helps the doctors and nurses know how well your treatment is working and whether to make any changes.

Pain can be managed by a variety of methods, which may include oral medication, adhesive skin patches, injection into an arm, leg, or vein. Pain medication may be given on a continuous, scheduled or as-needed basis.

You may discuss with your physician, nurse or pharmacist which method is best for you

Things you can do to manage your pain:

- Ask your doctor, nurse, or pharmacist what to expect from your illness, injury or surgery and what to expect from hospitalization.
- Discuss your pain control plan with your doctors, nurses, and pharmacist. Tell the doctor what medication has worked well or not so well in the past.
- If your pain medication is ordered on an as-needed basis, request it as soon as the pain starts. It is harder to ease pain once it has taken hold.
- If your pain medication is not controlling your pain, tell your doctor, nurse, or pharmacist.
- Use distractions like watching TV, listening to music, or meditation.
- Ask your nurse, doctor, or physical therapist if massage, warm packs, or cold packs would be helpful.
- Relaxation exercises such as jaw relaxation or slow rhythmic breathing may be helpful.



Managing Pain with Opioids

Prescription opioids can be used to help relieve moderate-to-severe pain and are often prescribed following a surgery or injury, or for certain health conditions. These medications can be an important part of treatment but also come with serious risks. Opioids are intended to improve your pain so that you are able to perform day-to-day activities, but not reduce your pain to zero. There is a fine balance between effective pain control and dangerous side effects, risks of addiction, and overdose, especially with prolonged use. It is important to work with your healthcare provider to make sure you are getting the safest, most effective care. As you transition to care at home, please be aware that there are medications that should be avoided with opiates (unless specifically advised by your health care provider). Medications to avoid include alcohol, benzodiazepines (such as Xanax or Valium), muscle relaxants (such as Soma or Flexeril), and hypnotics (such as Ambien or Lunesta).

Talk to your health care provider about ways to manage your pain that don't involve prescription opioids. Some of these options may actually work better and have fewer risks and side effects. Options may include:

- Pain relievers such as acetaminophen, ibuprofen, and naproxen
- Some medications that are also used for depression or seizures
- Physical therapy and exercise
- Cognitive behavioral therapy, a psychological, goal-directed approach, in which patients learn how to modify physical, behavioral, and emotional triggers of pain and stress



Your Care and Treatment



Advanced Illness Management

If you have a serious illness or complicated chronic medical condition, you may benefit from the Advanced Illness Management (AIM) program we offer to our hospital patients. AIM, which is palliative care, is not the same as end-of-life hospice care. AIM is for anyone suffering from a serious or chronic illness requiring management of multiple symptoms, including pain and emotional needs. It often goes hand in hand with aggressive curative treatment.

Our AIM team is made up of specialists in this type of care, including doctors, nurses, social workers, and pastoral care. If you are struggling with a complex illness and feel this program may be of benefit to you, you are entitled to request a team consultation while in our care. Talk with your nurse or hospital physician as soon as possible so that we can begin providing advanced, compassionate care suitable to your needs.



Patient Responsibilities

Healing involves cooperation between patient and caregiver. It's a partnership where we ask for your active participation in:

- Providing accurate and complete information about present symptoms, past illnesses, hospitalizations, medications, and other health matters
- Reporting unexpected changes in your condition to those giving you care and letting us know if you don't understand your treatment



If You Have Concerns

Our staff strives to provide you with quality care and service. However, there may be an occasion to voice a concern. The first step is to request to speak to a Charge Nurse or the Department Director. You may also contact the Patient Advocates at 530-344-5428 for assistance.

- Following the treatment plan your physician recommends, including instructions of nurses and other professionals carrying out your physician's orders
- Learning as much as possible about your condition, your medications, and your care needs following your discharge from the hospital
- Meeting the financial obligations of your care as promptly as possible
- Being considerate of the rights and property of other patients and hospital employees
- Asking questions whenever you are unclear about any aspect of your care
- Accepting the consequences for decisions in which you have participated

Patients are prohibited from possessing illegal or dangerous items such as alcohol, weapons, or drugs (other than those prescribed by a health provider). In order to promote the healing and safety of Marshall patients, as well as the safety of employees and the community, if a Marshall employee suspects that a patient may be in possession of any illegal or dangerous item, the patient agrees to allow a Marshall employee to search his or her person or belongings.



Bioethics Committee

If you need assistance understanding or resolving a healthcare dilemma, the Bioethics Committee can help. Call the Patient Advocate at 530-344-5428 for assistance.

Preparing to Leave the Hospital

On the day of discharge: Discharge time from your room is 1 p.m. unless otherwise noted by your physician and/or case manager. Please arrange to have family or friends available to transport you to your home on your anticipated day of discharge.

A case manager will work with you, your family, and your physician to coordinate any services you might need during your hospitalization and after discharge. Your preference for a provider of after hospital services will be honored depending on availability. All services are dictated by your insurance coverage guidelines.

If you will need nursing care, therapy, or personal assistance at home, your physician will refer you to the appropriate service.

Patients with financial obligations will be contacted by the Financial Coordinator to secure payment before discharge. Any questions can be directed to 530-626-2770 x2991.

Discharge/Your Return Home

When you are ready to leave the hospital, different types of discharge may occur.

If you are going home, we will provide you information regarding follow-up care, medications to take and not take, activity limitations, diet and food restrictions, and all other instructions you need to know. If you identify as homeless, additional information and resources will be provided by MMC in accordance with SB1152.

If you are being discharged to a skilled nursing facility for rehabilitation or post-acute care, that facility will handle your care and instructions once you arrive. Ideally, your stay at a skilled nursing facility will be brief, because the best place to fully recover is at home. If additional rehabilitation is needed and you do go to such a facility, the goal will be to get you strong enough to return home as quickly as possible to complete your recovery. Additional home-based resources and home care are typically available once you leave the hospital or skilled nursing facility and these options may make it possible to leave the skilled nursing facility sooner than you may have thought.

If you are going home with hospice care, your care will be coordinated by the hospice of your choice.

Checklist for Discharge

Make sure you have the following information before you leave the hospital.



○ **Medicine list** – Includes all your new and former prescriptions, over-the-counter medicines, and vitamins. Ask if there are any medicines you can stop taking or that are not good to take together. Also make sure you know why, how and when to take each one.

○ **Prescriptions** – Check that your pharmacy has your new prescriptions and that you have a plan in place to get them filled, and a plan for storage and disposal.

○ **Discharge instructions** – Beyond medicine, this can include:

- Foods or activities to avoid
- Follow-up tests/appointments
- How to care for incisions or use equipment
- Warning signs to watch for
- Daily living adjustments (like how to get into bed)
- Who to call with questions

○ **After-hospital services** – Know how much support you'll need with:

- **Personal care:** bathing, eating, dressing, toileting
- **Home care:** cooking, cleaning, laundry, shopping
- **Healthcare:** taking medicines, follow-up appointments, physical therapy, wound care, injections, medical equipment.

○ **Local resources** – Ask your discharge planner for help finding local after-care services or other support groups.

○ **Medical records** – To request a copy of your medical records, call 530-626-2620.

Try the teach-back method.

Repeat back what you hear the discharge planner say to make sure you understand the details correctly.



If you're not sure about your care instructions or when to take your medicines at home, ask your nurse to review them with you again. Be sure to write down the information.

Billing Information



Insurance Billing

We want to make it as simple as possible for you to manage the costs of services. By discussing the expenses in advance with your doctor, your insurer, and the hospital, you will be better able to manage and understand your medical bills.

The Billing Department will bill your insurance company or companies. Please respond as quickly as possible to requests for information from Marshall or your insurance company. If you think you will need assistance with your hospital bill or if you need an itemized bill, call the financial counselors at 530-626-2618.



Marshall Discount Payment and Charity Care Policies

In accordance with California Health and Safety Code Sections 127400 et seq., Marshall Medical Center discounts payment or provides charity care to financially qualified patients. Patients who qualify for these discounts or charity care under our policies include patients who meet both of the following qualifications:

- The patient either is a self-pay patient, is under-insured, or has high medical costs, as described in our discount payment and charity care policies; AND
- The patient has a family income (as described in the policies) that does not exceed 400% of the federal policy level.

To receive a copy of our discount payment and charity care policies or to apply for discounted payment or charity care, please contact our customer service representatives at 530-626-2618.



Frequently Asked Questions about Insurance

Is this care a covered service under my insurance policy?

Your insurance policy information should outline what services are covered. If you have any questions, please call the customer service number on your insurance card.

Have I met my deductible?

Please call the customer service number on your insurance card. They can provide detailed information regarding your copayments and/or deductibles.

Is pre-authorization required from my insurance company?

Your doctor may be required to obtain a pre-authorization from your insurance company prior to you receiving care at Marshall. It is important that you check your insurance policy or contact your insurance provider to verify. If a pre-authorization is required, ensure that you inform your doctor. If one

is required and your doctor did not obtain one, you may have to pay for any care you receive at Marshall.

Is this an emergency condition?

If you come to our emergency room, you are entitled, by law, to receive an emergency medical screening exam, regardless of your insurance or your ability to pay. Your insurance must pay for the exam, as long as a prudent person would have believed an emergency existed.

Is Marshall a covered provider under my insurance?

Please contact your insurance company to verify whether or not care provided at Marshall is covered. In many cases, insurance companies offer an online provider directory that you can search.

Can I still get my care at Marshall, even if my insurance may not cover the services?

Yes, we welcome the opportunity to provide you with excellent healthcare, regardless of your insurance. You should be aware that you may have to pay for the services you receive when not covered by your insurance.



Marshall Medical Center vs. Doctor's Services

The care you receive at Marshall includes facility services, provided by Marshall, and may also include professional services, provided by doctors with whom Marshall contracts for their services. The doctors' services are separate from Marshall and you will be billed separately.

Doctor's services provided within Marshall may include some of the following:

- Diagnosing, evaluating and managing your health care needs, including emergency conditions
- Ordering and reviewing your diagnostic tests
- Reading and diagnosing your x-ray, CAT scan, or MRI
- Reviewing and diagnosing your laboratory and pathology samples
- Supervising the administration of anesthesia
- Performing surgical and specialized procedures
- Telehealth services

Some of the doctor groups that provide care at Marshall are the Marshall Medical Foundation, USAcute Care Solutions, Placerville Radiology Medical Group, El Dorado Pathology Medical Group, VeeMed, and El Dorado Anesthesia Medical Group.

Give to Marshall Foundation



Marshall Foundation for Community Health

Marshall Medical Center is committed to quality in every aspect of your care. Many of our patients seek ways to show their appreciation for the caring kindness received. Since 1974, Marshall Foundation for Community Health has assisted grateful patients in benefiting "programs that care for people." The sole purpose of the Foundation is to help keep the community healthier by providing a resource for donors to accomplish their dreams through philanthropy. Charitable contributions help ensure quality healthcare will continue to be available here in our community. You may wish to consider a gift for a specific purpose or to honor a loved one. For more information, call 530-642-9984.

Marshall Golden Club

We take a special interest in the seniors of our community. The Marshall Golden Club is a free service for seniors sponsored by Marshall Foundation for Community Health. Members have access to the following services:

- Free assistance with Medicare and other insurance paperwork
- Low-cost glucose and cholesterol screenings by appointment through Marshall's Diabetes & Nutrition Education department in Cameron Park
- Low-income funding for emergency response systems units
- Free notary services
- 20% discount on meals in the hospital cafeteria at any time
- Free meals in your room for a spouse who visits you while you are in the hospital
- Estate preservation and planned giving seminars

For more information, call 530-642-9984.

Common Side Effects of Frequently Used Medications

To treat your condition while you're in the hospital, and for your follow-up care, you may be prescribed new medications you are not familiar with. The goal of this handout is to educate you about the medication(s) you may now be taking, as well as their common side effects.

MEDICATION (Generic Name)	BRAND NAME	COMMONLY USED FOR	COMMON SIDE EFFECTS	OTHER SIMILAR MEDICATIONS
Ondansetron	Zofran	Treats and prevents upset stomach and throwing up	Headache, feeling tired or weak, constipation, feeling sleepy, caution when standing	
Promethazine	Phenergan	Treats and prevents upset stomach and throwing up. Also helps to ease allergy symptoms, motion sickness and pain	Dizziness, feeling sleepy, blurred eyesight, dry mouth, upset stomach, trouble sleeping, feeling nervous and excitable, caution when standing	
Morphine	Duramorph	Relieves moderate to severe pain	Feeling sleepy, dizziness, dry mouth, upset stomach, constipation, headache, itching, caution when standing	Morphine extended release (Avinza, MS Contin, Kadian)
Oxycodone	Roxicodone, Percocet	Relieves moderate to severe pain	Upset stomach, constipation, dizziness, headache, trouble sleeping, dry mouth, caution when standing	Oxycodone extended release (Oxycontin)
Hydromorphone	Dilaudid	Relieves moderate to severe pain	Constipation, dizziness, feeling sleepy, dry mouth, flushing, upset stomach, headache, sweating, feeling tired or weak, caution when standing	Hydromorphone extended release (Exalgo)
Hydrocodone/ Acetaminophen	Norco, Vicodin, Lortab	Relieves mild to severe pain depending on the formulation	Constipation, dizziness, upset stomach, feeling sleepy, caution when standing	
Tramadol	Ultram	Relieves moderate to severe pain	Constipation, diarrhea, dizziness, feeling sleepy, dry mouth, headache, itching, upset stomach, trouble sleeping, feeling weak, caution when standing	
Gabapentin	Neurontin	Most often used to treat seizures or pain from nerve conditions.	Dizziness, feeling sleepy, upset stomach, throwing up, diarrhea, dry mouth, feeling weak or tired	Pregabalin (Lyrica)
Cefazolin	Ancel	Treats and prevents bacterial infections	Upset stomach, diarrhea, loss of appetite	
Piperacillin/ Tazobactam	Zosyn	Treats bacterial infections	Headache, upset stomach, diarrhea, constipation, trouble sleeping	
Ceftriaxone	Rocephin	Treats and prevents bacterial infections	Irritation around the site of injection, diarrhea	
Metronidazole	Flagyl	Treats and prevents infections	Upset stomach, diarrhea, constipation, headache, loss of appetite, metallic taste in the mouth	
Ipratropium Inhalation	Atrovent	Used to open the airways of the lungs in breathing disorders	Back pain, headache, flu-like symptoms, nose and throat irritation, stuffy nose	
Albuterol	Proventil, ProAir, Ventolin	Used to open the airways of the lungs in breathing disease and exercise caused breathing problems	Feeling nervous and excitable, headache, dizziness, upset stomach, shakiness, throat irritation, runny nose	

This list does not include ALL medications you may be prescribed, nor all side effects.
If you have questions not answered here, please talk with your nurse, doctor or pharmacist.

This reference sheet was compiled by the Marshall Medical Center Hospital Pharmacy.

MEDICATION (Generic Name)	BRAND NAME	COMMONLY USED FOR	COMMON SIDE EFFECTS	OTHER SIMILAR MEDICATIONS
Atorvastatin	Lipitor	Reduces LDL and triglycerides. Works to prevent heart attacks, strokes, chest pain and to slow the progress of heart disease	Diarrhea, joint pain, upset stomach, trouble sleeping, nose and throat irritation	Lovastatin (Mevacor), Simvastatin (Zocor), Pravastatin (Pravachol)
Metoprolol	Lopressor, Toprol-XL	Lowers blood pressure and heart rate	Dizziness, feeling tired or weak, diarrhea, throwing up, caution when standing	Atenolol (Tenormin)
Carvedilol	Coreg	Treats high blood pressure and heart failure. Given after a heart attack to prevent future heart attacks	Dizziness, feeling tired or weak, diarrhea, headache, upset stomach, weight gain, joint pain	
Furosemide	Lasix	Gets rid of excess fluid and reduces blood pressure	Constipation, diarrhea, dizziness, upset stomach, headache	Bumetanide, Torsemide (Demadex), Ethacrynic Acid (Edecrin)
Amlodipine	Norvasc	Lowers blood pressure	Dizziness, feeling tired or weak, flushing, upset stomach, belly pain, swelling of the legs, ankles and feet	Felodipine (Plendil), Nifedipine (Adalat CC, Procardia)
Lisinopril	Zestril/ Prinivil	Lowers blood pressure	Dizziness, headache, cough, caution when standing	Benazepril (Lotensin), Enalapril (Vasotec), Quinapril (Accupril), Ramipril (Altace)
Losartan	Cozaar	Lowers blood pressure	Dizziness, diarrhea, feeling tired or weak, flu-like symptoms, back pain, nose and throat irritation, cough, caution when standing	Valsartan (Diovan), Omesartan (Benicar), Irbesartan (Avapro), Telmisartan (Micardis)
Levetiracetam	Keppra	Treats seizures	Feeling sleepy, cough, diarrhea, dizziness, stuffy nose, irritation of nose and throat, trouble sleeping, upset stomach, headache, loss of appetite	
Enoxaparin	Lovenox	Prevents blood clots from forming and treats blood clots that have already formed	Upset stomach, irritation around the site of injection, diarrhea, bleeding, bruising	Heparin
Lactobacillus	Culturelle	A dietary supplement to keep a normal balance of good bacteria in the gastrointestinal tract	Gas, bloating	Floranex, Lactinex, VSL #3
Docusate	Colace, Surfak	Softens the stool to help with constipation	Belly cramps, diarrhea	
Pantoprazole	Protonix	Gastroesophageal reflux disease and other syndromes caused by too much stomach acid production	Headache, diarrhea, upset stomach, dizziness, joint pain	Omeprazole (Prilosec), Esomeprazole (Nexium), Lansoprazole (Prevacid)
Lorazepam	Ativan	Treats anxiety and seizures	Feeling sleepy, dizziness, headache, feeling weak, caution when standing	Diazepam (Valium), Alprazolam (Xanax), Clonazepam (Klonopin)
Metformin	Glucophage	Lowers blood sugar	Diarrhea, gas, upset stomach, feeling tired or weak	

Patient Rights

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 access your medical records. You will receive a separate “Notice of Privacy Practices” that explains your rights to access your records. 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 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

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Patient Rights

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 a support person as well as visitors of your choosing, if you have decision-making capacity, whether or not the visitor is related by blood, marriage, or registered domestic partner status, 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, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, gender identity/expression, disability, medical condition, marital status, age, registered domestic partner status, genetic information, citizenship, primary language, immigration status (except as required by federal law) or the source of payment for care. If you believe that

these rights have been denied to you, you may file a grievance with this hospital or you can file a grievance with the Office for Civil Rights, by writing or calling:
*U. S. Department of Health & Human Services
Office for Civil Rights – Region IX
90 7th Street, Suite 4-10
San Francisco, CA 94103
(800) 368-1019
(800) 537-7697 TDD*

22. File a grievance. If you want to file a grievance with this hospital, you may do so by writing or by calling:
*Patient Advocate Office
1100 Marshall Way
Placerville, CA 95667
(530) 344-5428*
The grievance committee will review each grievance and provide you with a written response within 45 days. For grievances regarding billing issues or care provider behavior we will respond with a resolution 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 and the final determination. Concerns regarding quality of care or premature discharge may 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:
*California Department of Public Health
Licensing and Certification
3901 Lennane Drive, Suite 210
Sacramento, CA 95815
(916) 263-5800.*
24. File a complaint with the Department of Fair Employment and Housing at www.dfeh.ca.gov, (800) 884-1684 or (800) 700-2320 (TTY) or 2218 Kausen Dr., #100, Elk Grove, CA 95758.
25. File a complaint with the Medical Board of California at www.mbc.ca.gov/consumers/complaints, (800) 633-2322 or 2005 Evergreen St., #1200, Sacramento, CA 95815.

This Patient Rights document incorporates the requirements of The Joint Commission; Title 22, California Code of Regulations, Section 70707; Health and Safety Code Sections 1262.6, 1288.4, and 124960; 42 C.F.R. Section 482.13 (Medicare Conditions of Participation); and Section 1557 of the Affordable Care Act (42 U.S.C. 18116, 45 C.F.R. Part 92). (7/21)

Derechos del Paciente

1. Recibir una atención considerada y respetuosa, y a sentirse cómodo. Usted tiene derecho a ser respetado por sus valores, creencias y preferencias culturales, psicosociales, espirituales y personales.
2. Que le avisen de inmediato a un familiar (u otro representante de su elección) y a su propio médico que ha sido admitido en el hospital.
3. Saber el nombre del profesional de atención médica certificado que actúa en el marco de su certificación profesional y que tiene la responsabilidad principal de coordinar su atención, y los nombres y las relaciones profesionales de los médicos y empleados de salud que lo verán.
4. Recibir información acerca de su estado de salud, diagnóstico, pronóstico, tratamiento, posibilidades de recuperación y resultados de la atención (incluidos los resultados no esperados) con términos que usted pueda comprender. Usted tiene el derecho al acceso de su historial médico. Recibirá una “Notificación de Prácticas Privadas” separada en la que se explica sus derechos de acceso a su historial. Tiene derecho a tener una comunicación efectiva y participar en el desarrollo e implementación de su plan de atención. También puede participar en cuestiones éticas que surjan durante su atención, incluidos temas sobre resolución de conflictos, negación a recibir servicios de resucitación, y continuación o retiro del tratamiento para mantener la vida.
5. Tomar decisiones sobre su atención y recibir toda la información sobre cualquier tratamiento o procedimiento propuesto que pueda necesitar para dar su consentimiento informado o negarse al tratamiento. Excepto en casos de emergencia, esta información incluirá una descripción del procedimiento o tratamiento, los riesgos médicamente significativos que implican, los tratamientos alternativos o no tratamientos, y los riesgos que cada uno incluye, y el nombre de la persona que realizará el procedimiento o tratamiento.
6. Solicitar o negarse a recibir tratamiento, en la medida que lo permita la ley. Sin embargo, usted no tiene derecho a exigir tratamientos o servicios inadecuados o que no sean médicamente necesarios. Tiene derecho a abandonar el hospital incluso en contra de la recomendación de los miembros del personal médico, en la medida que lo permita la ley.
7. Ser notificado si el hospital o el profesional de atención médica certificado que actúa en el marco de su certificación profesional proponen participar o realizar experimentos en humanos que afecten su atención o tratamiento. Tiene derecho a negarse a participar en tales proyectos de investigación.
8. Recibir respuestas razonables a toda solicitud razonable que realice sobre los servicios.
9. Recibir una evaluación y un control adecuados de su dolor, información sobre el dolor y medidas para el alivio del dolor, y a participar en decisiones acerca del control del dolor. También puede solicitar o rechazar el uso de cualquiera o de todas las modalidades para aliviar el dolor, incluidos los medicamentos opiáceos si sufre de dolor crónico grave persistente. El médico puede negarse a recetar medicamentos opiáceos, pero si es así, debe informarle a usted que existen médicos que se especializan en el tratamiento del dolor con métodos que incluyen el uso de opiáceos.
10. Formular instrucciones anticipadas. Esto incluye designar a una persona que tome las decisiones si usted no puede comprender un tratamiento propuesto o si no puede comunicar sus deseos con respecto a la atención. El personal y los profesionales de la salud que proporcionan atención en el hospital cumplirán dichas instrucciones. Todos los derechos del paciente se aplican a la persona que tiene la responsabilidad legal de tomar las decisiones relacionadas con la atención médica en su nombre.
11. Que su privacidad sea respetada. La discusión del caso, las consultas, los exámenes y el tratamiento son confidenciales y se deben realizar con discreción. Tiene derecho a que le indiquen la razón de la presencia de cualquier persona. También tiene derecho a que las visitas se retiren antes de un examen y cuando se habla de temas relacionados con el tratamiento. Se usarán cortinas para privacidad en habitaciones semiprivadas.
12. Recibir tratamiento confidencial de todas las comunicaciones y registros relacionados con su atención y permanencia en el hospital. Usted recibirá un “Aviso sobre prácticas de privacidad” (Notice of Privacy Practices) por separado que explica en detalle sus derechos a la privacidad y cómo podemos utilizar y divulgar la información protegida sobre su salud.
13. Recibir atención en un entorno seguro, donde no haya abuso mental, físico, sexual ni verbal, ni tampoco abandono, explotación o acoso. Usted tiene derecho a acceder a servicios de protección y defensa, lo que incluye notificarles a las agencias del gobierno sobre abandono o abuso.
14. No tener restricciones ni estar aislado de ninguna forma por decisión del personal como medio de coerción, disciplina, conveniencia o represalia.
15. Recibir una atención razonablemente continua y saber por adelantado la hora y el lugar de las citas, así como también la identidad de las personas que proporcionan la atención médica.
16. Ser informado por el médico, o un representante del médico, de los requisitos y opciones de atención médica continua luego de ser dado de alta del hospital. También

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Derechos del Paciente

tiene derecho a participar en el desarrollo e implementación de su plan para ser dado de alta. Si lo solicita, un amigo o un familiar también pueden recibir esta información.

17. Conocer las reglas y políticas del hospital que se aplican a su conducta mientras sea paciente del hospital.
 18. Designar un acompañante así como también visitas que usted elija, si tiene la capacidad de tomar decisiones, independientemente de que la visita sea un familiar de sangre, por matrimonio o una pareja de hecho registrada, a menos que:
 - No se permitan visitas.
 - El establecimiento determine de manera razonable que la presencia de una visita en particular podría poner en peligro la salud o la seguridad de un paciente, de un miembro del personal del establecimiento de salud o de otras visitas en el establecimiento, o podría interrumpir de manera significativa las funciones de dicho establecimiento.
 - Usted le haya notificado al personal del establecimiento de salud que ya no desea que una persona determinada lo visite.
- Sin embargo, un establecimiento de salud puede establecer restricciones razonables para las visitas, incluidas restricciones sobre los horarios de visita y la cantidad de personas. El establecimiento de salud debe informarle a usted (o a su acompañante, cuando corresponda) sobre sus derechos de visita, incluidas las restricciones o limitaciones clínicas. El establecimiento de salud no puede restringir, limitar o, de otro modo, negar los privilegios de visita por razones de raza, color, nacionalidad, religión, sexo, identidad de género, orientación sexual o discapacidad.
19. Que sus deseos sean tenidos en cuenta si no tiene la capacidad de tomar decisiones para determinar quién lo puede visitar. El método de dicha consideración cumplirá con la ley federal y se divulgará en las políticas del hospital sobre las visitas. Como mínimo, el hospital incluirá toda persona que viva en su hogar y acompañante de conformidad con la ley federal.
 20. Evaluar y recibir una explicación de la cuenta del hospital, independientemente de la fuente de pago.
 21. Ejercer estos derechos sin importar su sexo, situación económica, nivel de educación, raza, color, religión, ascendencia, nacionalidad de origen, orientación sexual, identidad/expresión de género, discapacidad, condición médica, estado civil, edad, concubinato registrado, información genética, ciudadanía, idioma primario, estatus migratorio (excepto según lo requerido por ley federal) o la fuente de pago para su atención médica, o puede

presentarlo a la Oficina de Derechos Civiles por escrito o vía telefónica:

*U. S. Department of Health & Human Services
Office for Civil Rights – Region IX
90 7th Street, Suite 4-10
San Francisco, CA 94103
(800) 368-1019
(800) 537-7697 TDD*

22. Presentar una queja. Si desea presentar una queja ante este hospital, puede hacerlo escribiendo o llamando a:
*Patient Advocate Office
1100 Marshall Way
Placerville, CA 95667
(530) 344-5428*
El comité de quejas revisará cada queja y le proporcionará una respuesta por escrito dentro de los 45 días. Por quejas relacionadas con problemas de facturación o comportamiento del proveedor de atención, responderemos con una resolución dentro de los 30 días. La respuesta por escrito incluirá el nombre de una persona con quien comunicarse en el hospital, los pasos que se tomaron para investigar la queja y la determinación final. También se pueden remitir las inquietudes con respecto a la calidad de la atención o el alta prematura a la Organización para la Evaluación de Normas Profesionales (Peer Review Organization, PRO) de Control de Calidad y Utilización correspondiente.
23. Presentar una queja en el Departamento de Salud Pública de California (California Department of Public Health, CDPH), independientemente de que utilice el proceso de quejas del hospital. El número de teléfono y la dirección del Departamento de Salud Pública de California son:
*California Department of Public Health
Licensing and Certification
3901 Lennane Drive, Suite 210
Sacramento, CA 95815
(916) 263-5800.*
24. Presentar una queja en el Departamento de Empleo y Vivienda Justa en www.dfeh.ca.gov, (800) 884-1684 o (800) 700-2320 (TTY) o 2218 Kausen Dr., #100, Elk Grove, CA 95758.
25. Presentar una queja en el Junta Médica de California en www.mbc.ca.gov/consumers/complaints, (800) 633-2322 o 2005 Evergreen St., #1200, Sacramento, CA 95815.

Estos derechos del paciente combina el Título 22 y otras leyes de California, los requisitos de La Comisión Conjunta y de las condiciones de participación de Medicare; y la Sección 1557 de la Ley de Protección al Paciente y Cuidado de Salud Asequible (Título 42 del Código de Estados Unidos, sección 18116; Título 45 del Código de Regulaciones Federales, Parte 92). (7/21)



Founded in 1959, Marshall Medical Center is an independent, nonprofit community healthcare provider located in the heart of the Sierra Foothills between Sacramento and South Lake Tahoe. Marshall Medical Center includes Marshall Hospital, a fully accredited acute care facility with 111 beds located in Placerville; several outpatient facilities in Cameron Park, El Dorado Hills, Placerville and Georgetown; and many community health and education programs. Marshall has over 220 board-certified providers and a team of over 1,400 employees providing quality healthcare services to more than 180,000 residents of El Dorado County.



It's about you

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