



## **OWNERSHIP DISCLOSURE**

Due to recent regulations affecting physician based business practices, this disclosure statement is being provided to acknowledge that Dr. Fadel Nammour is owner of Dakota Gastroenterology Clinic facility where your procedure will be performed.

## **VIDEO SURVEILLANCE**

For your safety, Dakota Gastroenterology Clinic has installed video cameras in the waiting areas and recovery room to monitor patients in these areas. It is a live feed and no footage will be recorded.

## **ADVANCED DIRECTIVES**

An advanced directive informs your physician what kind of care you would like to have if you become unable to make medical decisions because of an accident, illness or medical incapacity. While Dakota Gastroenterology Clinic recognizes and respects the rights of the patient to provide this facility with a copy of their directive, it is our organization's policy to sustain life until the patient is transferred to a hospital. If a patient experiences a life-threatening emergency or otherwise becomes incapacitated while receiving care at our facility, we will provide all necessary life-sustaining measures and will promptly and safely transfer the patient to a healthcare facility that will follow the advanced directive.

## **TRANSPORTATION**

You are being informed prior to receiving sedation that it is recommended not to drive for a period of twelve hours following sedation for a procedure. You may not leave the facility without a licensed driver that has accepted responsibility for escorting you home. Should you arrive at the facility without a driver, your procedure may be rescheduled and/or canceled. Leaving the facility without a responsible driver is considered leaving against medical advice.

## **PATIENT AND VISITOR BELONGINGS AND VALUABLES**

Patients and visitors are responsible for all personal belongings and valuables brought into Dakota Gastroenterology Clinic. We are not responsible for replacing lost, misplaced, stolen or damaged belongings and valuables; therefore, we recommend patients bring only those items as directed such as identification, insurance cards and a method of payment.

## INSURANCE AND FINANCIALS POLICIES

**It is your responsibility to check with your insurance plan regarding coverage, co-payments, co-insurance or deductibles you may owe.**

We cannot guarantee payments by your insurance and all quotes are estimates. Actual payments may change once the claim is processed by your insurer. If your account is not paid in full within 60 days and you did not make any arrangements with our business office, collection proceedings will begin. You will be responsible for all costs of collections including attorney fees, collection fees and court costs. Also, any unpaid balance will be assessed interest at 18.00%.

## PROCEDURE RISKS

Endoscopic procedures are relatively safe, and complications occur in a small percentage. Possible complications of these procedures include, but are not limited to:

•Perforation: Injury to the lining leading to a hole in the lining, due to the scope itself, or after removal of polyp or after treatment of a bleeding site. This may occur during the procedure, immediately after the procedure or after patients return home. If this occurs, patients will need to be admitted to the hospital and you may need surgery.

•Bleeding: Mainly occurs after removal of polyp or using cautery during procedure. It may still occur 2 weeks after the procedure. Usually it stops on its own, in rare occasions patients may need a blood transfusion and repeat procedures or surgery to stop the bleeding.

•Missed lesions: Polyps, especially small ones, can be missed, and, in rare cases, colon cancer can be missed. Colonoscopy does not guarantee that you will not develop colon cancer, but removing polyps is documented to significantly decrease your risk of colon cancer in the future.

Other extremely rare, but serious or possibly fatal risks include:

•Difficulty breathing, heart attack, and stroke.

•Inflammation, thrombus, infection or nerve damage at the site of the intravenous needle or in the bloodstream may occur, although very rare.