

GAILEY EYE SURGERY-DECATUR

LASER PROCEDURE INFORMATION

You should have been given a "Patient Rights and Responsibilities" sheet that outlines your rights and responsibilities as a patient, as well as statements on Gailey Eye Surgery's policy on advance directives and facility ownership. If you did not receive this form or want further clarification regarding this form, please call us at 217-875-2600 and ask for a pretesting nurse to answer your questions.

Gailey Eye Surgery-Decatur is open from **7 am - 5 pm, Monday through Thursday**. Two days prior to your procedure, you will receive a call with instructions on your arrival time. If you have not received a phone call, please call the day before and ask to speak to a nurse at **217-875-2600**.

The Day of your Procedure:

- You may eat, drink, and take all of your usual medications the morning of your procedure.
- **Wear** comfortable clothing and a short sleeved shirt.
- **Remove all jewelry and metal objects and leave at home.**
- If you were asked to purchase eye medications for use after your procedure, please bring them with you.
- **Bring someone with you to drive you home the day of your procedure, unless you have been instructed otherwise.**
- **Bring a photo I.D. and your current insurance cards, and any advance directives** (*ie: living will or power of attorney for healthcare*).
- Bring appropriate amount and method of payment if you were asked to do so.
- You will be asked to sign consents; in the case of minors, the consents must be signed by a parent or legal guardian.

Billing Information:

The patient is responsible for contacting their insurance provider to verify insurance coverage for each of the individual services listed below.

1. Physician Fee

Gailey Eye Clinic: 1-800-325-7706 or 1-309-829-5311

This charge is for the doctor's fee. Please contact the clinic for specific questions concerning this portion of your bill.

2. Surgical Facility Fee

Gailey Eye Clinic: 1-800-325-7706 or 1-309-829-5311

This charge is for the surgical facility, equipment/supplies, and support staff.

The day of your surgery, we require and will collect any co-payments, co-insurance and/or deductibles; please be prepared to make this payment. Gailey Eye Surgery-Decatur accepts Visa, MasterCard, Discover, money orders, cash (exact change please), and personal checks that are provided to us 7 business days **in advance** of your procedure. Please contact the facility for specific questions concerning this portion of your bill.

Address for Gailey Eye Surgery-Decatur:

646 W. Pershing Rd., Decatur, IL 62526 (Entrance is located behind the Clinic in the north parking lot.)

Additional instructions are available upon request at Gailey Eye Clinic.