



SPRINGFIELD ORTHOPAEDIC
AND
SPORTS MEDICINE INSTITUTE

Allow us to introduce you to our community's premier health care facility: Ohio Valley.

Ohio Valley is a modern medical center comprised of a surgical hospital, an imaging center, physical therapy center and laboratory facilities owned and directed by surgeons and physicians who live and work in Springfield. These facilities are the result of our commitment to the health of our patients and community.

As a patient, **you always have a choice in where you go for medical care.** For that reason, **it is with great pride that we inform you that we are investors in Ohio Valley.** We are committed to providing high quality and personalized care in a setting dedicated to you – the patient, and to the betterment of our community. Because physicians have a true voice in how care is delivered at Ohio Valley, we proudly provide industry leading low nurse to patient ratios, and highly experienced nursing staff. Ohio Valley is equipped with the latest technology in a setting dedicated to your health, safety and comfort. We are required to inform you that a physician is not necessarily on the premises, however, highly trained anesthesia personnel certified in Adult and Pediatric Advanced Life Support are present around the clock. In addition, your physicians are available at all times by phone and are just minutes away to meet emergency medical needs.

In the event that treating your condition requires an operation, hospitalization, physical therapy, laboratory or imaging tests (x-ray, MRI, CT scan, ultrasound), it would be our privilege to provide that care at Ohio Valley.

Thank you for entrusting us with your medical care.

Dr. Ian M. Thompson , Dr. David Galluch and Dr. Noshir Deboo

I understand that I am free to choose where to receive my medical care. I understand that Dr. Thompson, Dr. Galluch and Dr. Deboo are investors in Ohio Valley Surgical Hospital, Ohio Valley Imaging, Laboratory and Physical Therapy Centers.

Patient or Guarantor Signature

Date

Patient Name

Date of Birth

Witness Signature