

Facility Name: Indiana Specialty Surgery Center	Policy And Procedure Guideline Name: Patient Rights and Responsibilities	Policy Number: PR - 100
	Subject Category: Patient Rights and Responsibilities	Effective Date: 04/2016
		Reviewed: 08/14 Revised: 02/15 Revised: 4/2016
		Page 1 Of 4

PATIENT RIGHTS

Patients have the right to:

- Receive access to equal medical treatment and accommodations regardless of race, creed, sex, national origin, religion or sources of payment for care.
- Be informed of physician ownership in the center.
- Be fully informed and have complete information provided in a manner or the language primarily used by the patient or patient surrogate, to the extent known by the physician, regarding diagnosis, evaluation, treatment, procedure, expected outcome and prognosis, as well as the risks and side effects associated with treatment and procedure prior to the procedure. When it is medically inadvisable to give such information to the patient, the information is given to the patient’s designated person or to a legally authorized person.
- Be free from any act of discrimination and to exercise his or her rights without being subjected to discrimination or reprisal.
- Voice grievances and/or complaints regarding treatment or care that is (or fails to be) provided.
- Personal privacy and security of individually identifiable health information, as specified in Title 45 CFR parts 160 and 164.
- Receive care in a safe setting.
- Be free from all forms of abuse or harassment.
- Receive the care necessary to regain or maintain his or her maximum state of health and if necessary, cope with death.
- Receive notice of their rights prior to the start of surgical procedure in verbal and written notice in a language and manner that ensures the patient, or the patient’s representative, *or the patient’s surrogate* understand *all of the patient’s rights*. The Center protects and promotes the exercise of these rights.
- Expect personnel who care for the patient to be friendly, considerate, and respectful, and to be qualified through appropriate education and experience and perform the services they are responsible for with the highest degree of quality and excellence.
- Be fully informed of the scope of services available at the facility, their healthcare professionals’ credentials, provisions for afterhours care, payment policies and related fees for services rendered.
- Be participate in decisions involving their healthcare except when such participation is contraindicated by medical reason. If the patient is unable to participate in those decisions, the

patient's rights shall be exercised by the patient's designated representative or patient's surrogate other legally designated person.

- Make informed decisions regarding his or her care.
- Refuse treatment to the extent permitted by law and be informed of the medical consequences of such refusal. The patient accepts responsibility for his or her actions including refusal of treatment or not following the instructions of the physician or facility.
- Approve or refuse the release of medical records to any individual outside the facility, or as required by law or third party payment contract.
- Be informed of any human experimentation or other research/educational projects affecting his or her care of treatment and can refuse participation in such experimentation or research without compromise to the patient's usual care.
- Express grievances/complaints and suggestions at any time.
- Access to and/or copies of his/her medical records.
- Be informed verbally and in writing of the facility's policy regarding advance directives/living wills and related state and federal laws as well as access to more official advanced directive information and forms if desired.
- Be fully informed before any transfer to another facility or organization and ensure the receiving facility has accepted the patient transfer.
- Express those spiritual beliefs and cultural practices that do not harm or interfere with the planned course of medical therapy for the patient.
- Expect the facility to agree to comply with Federal Civil Rights Laws that assure it will provide interpretation for individuals who are not proficient in English.
- Have an assessment and a regular assessment and reassessment of pain.
- Education of patients, caregivers and surrogates, when appropriate, regarding their roles in managing pain.
- To change providers if other qualified providers are available.
- If a patient is adjudged incompetent under applicable state health and safety laws by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed under State law to act on the patient's behalf.
- If a state court has not adjudged a patient incompetent, any legal representative designated by the patient in accordance with state laws may exercise the patient's rights to the extent allowed by state law.

PATIENT RESPONSIBILITIES

Patients are responsible for:

- Being considerate and respectful of other patients and personnel and for assisting in the control of noise, eating and other distractions.
- Respecting the right and property of the facility and of other patients, visitors and personnel and notifying the center if the patient's rights have been violated.
- Reporting whether he or she clearly understands and agrees to the planned course of treatment and what is expected of him or her for self-care before and after the procedure.

Notifying the center if patient is unable or unwilling to follow instructions or has failed to follow previously given instructions.

- Keeping appointments and, when unable to do so for any reason, notifying the facility and physician. Notifying physician of any complications that occur after leaving the center.
- Providing care givers with the most accurate, honest, and complete information regarding present complaints, symptoms, past illnesses, procedures and hospitalizations, medications, unexpected changes in the patient's condition, or any other patient health matters.
- Observing prescribed rules of the facility during his or her stay and treatment and, if instructions are not followed, forfeit of care at the facility.
- Promptly fulfilling his or her financial obligations to the facility in a timely manner.
- Identifying and report any patient safety concerns to the facility personnel.
- Ensuring that a responsible adult accompanies the patient to the facility, drives the patient home after the procedure, and agrees to care for the patient after discharge for 24 hours, unless otherwise directed by their physician.

ADVANCE DIRECTIVE NOTIFICATION

All patients have the right to participate in their own health care decisions and to make Advance Directives or to execute Powers of Attorney that authorize others to make decisions on their behalf based on the patient's expressed wishes when the patient is unable to make decisions or unable to communicate decisions. Indiana Specialty Surgery Center respects and upholds those rights.

Our team is dedicated to delivering the highest quality care in a safe environment that places the patient at the center of our care. We respect your rights to participate in make decisions regarding your care and self determination and will carefully consider your requests. After careful consideration and reviewing the applicable Indiana state regulation, the leadership of the facility has established a policy to initiate resuscitative or other stabilizing measures and transfer you to an acute care hospital for further evaluation. The majority of procedures performed at Indiana Specialty Surgery Center are considered to be of minimal risk, hence the risk of you needing such measures are highly unlikely. At the acute care hospital, further treatment or withdrawal of treatment measures already begun will be ordered in accordance with your wishes, advance directive, or health care power of attorney.

You have the option of proceeding with care at our facility or having the procedure at another location that may not set the same limitations. Having been fully informed of our Statement of Limitations, you choose to proceed with your procedure at Indiana Specialty Surgery Center.

If you wish to complete an Advance Directive, copies of the official State forms are available at our facility.

If you do not agree with this facility's policy, we will be pleased to assist you in rescheduling your procedure.

PATIENT COMPLAINT OR GRIEVANCE

If you should have a concern of complaint regarding any services, treatment or care that is or fails to be rendered at our Center, please let us know while you are here so that we may have the opportunity to improve. You may also contact the facility Administrator at 812 330 1164 or by mail:

Indiana Specialty Surgery Center
1380 West Arch Haven Ave.
Bloomington, Indiana 47403

Complaints and grievances may also be filed through:

Indiana State Department of Health
2 N. Meridian
Indianapolis, Indiana
Complaint Line 1-800-246-8909

Office of Medicare Beneficiary Ombudsman
<http://medicare.gov/ombudsman/resources.asp>

OR

AAAHC- Accreditation Association for Ambulatory Health Care
Email: info@aaahc.org
Website: <http://www.aaahc.org>
Phone: 847-853-6060

Office of Medicare Beneficiary Ombudsman
<http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>

Notice of Physician Ownership

We recognize that you have the right to choose the provider of your healthcare services. Your physician may have financial interest or ownership in this surgery center. This involvement helps to ensure the finest quality of care for their patients. The following have an ownership interest: Earl Craig MD, Dale Dellacqua MD, Sterling Doster MD, Matthew Fornefeld MD ,Gregory Fox MD, Gary Gettelfinger MD, Alejandra Haddad DDS, MS, Aline Hamati- Haddad MD, George Peter Maiers II MD, Alex Meyers MD, Kevin Powers DPM, Michael Pannunzio MD, Ricardo Vasquez MD & United Surgical Partners International.