



YOUR RIGHTS AND RESPONSIBILITIES AS A PATIENT

ENDOSCOPY SPECIALISTS

INTRODUCTION

When you or your loved one needs medical care, you want the most appropriate and best care available. As a patient in a Texas facility, you have certain legal rights concerning your medical treatment. This is designed to help you understand those rights. After reading this, if you have questions, need further information, or wish to execute an advance directive, contact your physician or nurse.

PATIENT RIGHTS

ADC ENDOSCOPY SPECIALISTS respects the rights of the patient and recognizes that each patient is an individual with unique health care needs. Because of the importance of respecting each patient's dignity, we strive to provide considerate, respectful care, focused on the patient's individual needs.

ADC ENDOSCOPY SPECIALISTS affirms the patient's right to make decisions regarding his/her medical care, including decisions to discontinue treatment, to the extent permitted by law.

ADC ENDOSCOPY SPECIALISTS shall assist the patient in the exercise of his/her rights and inform the patient of any responsibilities necessary of him/her in the exercise of those rights.

PATIENTS SHOULD BE ABLE TO EXPECT THE FOLLOWING

- ◆ Reasonable response to his/her requests and needs for treatment or service, within the facility's capacity, its stated mission, and applicable laws and regulations.
- ◆ Considerate and respectful care as evidenced by: Consideration of the psychosocial, spiritual, and cultural differences that influence the understanding of illness.
- ◆ Effective management of pain.
- ◆ The right to choose your provider or change to another qualified provider.
- ◆ Collaboration with his/her physicians in making informed decisions involving his/her health care. This will include:
 - The right to accept or to refuse medical treatment, to the extent permitted by law and to be informed of the medical consequences of such refusal.
 - Formulating advance directive and appointing another decision maker to make health care decisions on his/her behalf to the extent permitted by law.
 - Information necessary to enable him/her to make treatment decisions that reflect his/her wishes.
 - Information at the time of admission about the facility's patient rights policies and the mechanism for the initiation, review, and when possible, resolution of patient complaints concerning the quality of care.
 - Participation by the patient or patient's designated representative in consideration of ethical issues that arise in the care of the patient.
 - To be informed of any human experimentation or other research or other research/educational projects affecting his/her care or treatment.
 - Personal privacy and confidentiality of information, within the limits of law and access to information contained in the patient's medical record, within a reasonable time frame.
 - To receive care in a safe setting and to be free from all forms of abuse or harassment.
 - To have family members or representatives of his/her own choice and his/her own physician notified promptly of his/her admission to the facility.
- ◆ If a patient is a minor, declared legally incompetent, or medically incapable of voicing wishes about medical treatment, the patient's guardian, next of kin, or legally authorized responsible person may exercise the patient's rights as allowed by law, on behalf of the patient.

PATIENT CONDUCT, RESPONSIBILITIES AND PARTICIPATION

- ◆ Be honest and direct about everything that relates to you as a patient. Answer questions honestly and completely and inform care givers exactly how you feel about things happening to you.
- ◆ ADC ENDOSCOPY SPECIALISTS wants you to understand your health condition to your satisfaction. Speak to your physicians if you do not understand your illness or treatment.
- ◆ Tell your nurses and/or your physician about any change in your health status while you are a patient at ADC ENDOSCOPY SPECIALISTS.
- ◆ Advise those treating you whether you can, or will, follow the treatment plan.

- ◆ Keep your appointment and cooperate with physicians and others caring for you to assure continuity of your care.
- ◆ Provide complete and accurate information to the best of your ability about your health and the names and purpose of any medications you have been taking, including over-the-counter products, dietary supplements, and any allergies or sensitivities.
- ◆ Tell your physician about personal habits affecting your health such as smoking, alcohol intake and sleep patterns.
- ◆ Know the names of physicians responsible for you care.
- ◆ Refrain from making unreasonable demands upon the facility or upon those responsible for your care. Be respectful of all the health care professionals and staff.
- ◆ Be considerate of other patients and respect their right to privacy.
- ◆ Be prompt about paying your bills, providing information necessary for insurance processing of your bill, and asking questions concerning your bill. Accept personal financial responsibility for any charges not covered by your insurance.
- ◆ Inform your provider about any living will, medical power of attorney, or other directive that could affect your care.
- ◆ Notify appropriate persons in the facility as soon as possible if, in your opinion, you are not being treated fairly or properly.
- ◆ Provide a responsible adult to transport you home from the facility and remain with you for 24 hours, if required by your provider.

<p>Texas Department of State and Health Services PO Box 149347 Austin, Texas 78714-9347 Telephone (888) 973-0022 Fax (512) 834-6653</p>	<p>Medicare Ombudsman’s Website www.cms.hhs.gov/center/ombudsman.asp Telephone 1-800-633-4227 The Medicare Ombudsman role is to ensure that Medicare beneficiaries receive the information and help they need to understand Medicare options and to apply their Medicare Rights and protections.</p>	<p>To file a complaint or grievance you may contact: ADC Endoscopy Specialists Director of Endoscopy #1 Care Circle Dr Amarillo, Texas , 79124 Telephone (806) 353-1769</p>
<p>Accreditation Association <i>for</i> Ambulatory Healthcare (AAAHHC) www.aaahc.org 5250 Old Orchard Road, Suite 200 Skokie, IL 60077 Telephone (847) 853-6060 Fax (847) 853-9028</p>		