

PATIENT RIGHTS

Patient Rights and Responsibilities were established with the expectation that observance of these rights will contribute to more effective patient care and greater satisfaction for the patient, family, physician and the facility caring for the patient. Patients have the following rights without regard to age, race, sex, national origin, religion, culture, or physical handicap.

The Federal Government requires that you be informed of these rights prior to the day of your procedure. This completed and signed form must be present at the time of your admission to the surgery center.

THE PATIENT HAS A RIGHT TO:

- Receive the care necessary to help regain or maintain his or her maximum state of health.
- Expect personnel who care for the patient to be friendly, considerate, respectful, and qualified through education and experience and perform the services for which they are responsible with the highest quality of service.
- Expect full recognition of individuality, including personal privacy in treatment and care. All communications and records will be kept confidential.
- Complete information, to the extent known by the physician, regarding diagnosis, treatment, and prognosis, as well as alternative treatments or procedures and the possible risks and side effects associated with treatment.
- Be a participant in the decisions regarding the intensity and scope of treatment. This includes the right to request or refuse treatment.
- Be fully informed of the scope of services available at the facility, provisions for after hours and emergency care.
- Receive information in a manner that the patient can understand. Communication with the patient will be effective and provided in a manner that facilitates understanding by the patient.
- Have knowledge of the names of the physician who has primary responsibility for coordinating his or her care and the names of other professional relationships of other physicians and healthcare providers who will see him or her. The patient has a right to change providers if other qualified providers are available.
- Be advised if the physician has a financial interest in the surgery center.
 - ☐ Physician has financial interest in the surgery center.
 - ☐ Physician does not have financial interest in the surgery center.

You have the right to have the services performed at another surgery center, which offers the same or similar services. If you are interested in having your services performed at another surgery center, please let us know and we can provide you with information about alternative facilities.

- Have all patient rights apply to the person who has legal responsibility to make decisions regarding medical care on behalf of the patient.
- Approve or refuse the release of medical records to any individual outside the facility, except in the case of transfer to another health facility, or as required by law or a third-party payment contract.
- Be informed of any human experimentation or other research/educational projects affecting his or her care or treatment and can refuse participation in such without compromise to the patient's usual care.
- Be informed of the facility's policy regarding advanced directives and living wills. See attached.
- Access to copies of his or her individual medical record within a reasonable amount of time.
- Receive an explanation of bill and fees involved.
- Express those spiritual beliefs and cultural practices that do not harm others or interfere with the planned course of medical therapy.
- Have an initial assessment and regular reassessments of pain.
- Education of patient and families, when appropriate, regarding their roles in managing pain, as well as potential limitations and side effects of pain treatment.
- Be advised of the facility's grievance process should the patient wish to communicate a concern regarding the quality of care received. Contact Katherine Altonaga, facility Administrator at 650-570-0500.
- Be advised of the contact information for the state agency to which complaints can be reported, as well as contact information for the Office of the Medicare Beneficiary Ombudsman. Health Services Advisory Group at www.hsag.com or 818-409-9229. Or go to www.medicare.gov. TTY users should call 1-877-486-2048 or visit the Ombudsman's website at www.cms.hhs.gov/center/ombudsman.asp.
- The local agency you may call is Department of Health Services; 350 9th St. Daly City, CA 94015 or call 650-301-9971; Gina Brown 415-744-2931.
- California Department of Public Health, licensing and Certification Program, San Francisco District Office, 150 N. Hill Drive, Suite 22, Brisbane, CA 94005 Phone: 415-330-6353; Fax: 415-330-6350.

PATIENT RESPONSIBILITIES

- Provide caregivers with the most accurate and complete information regarding present complaints, past illnesses, hospitalizations, medications, unexpected changes in patient's condition or any other patient health matters.
- Provide a responsible adult to provide transportation for him or her from the facility to home and to stay for 24 hours.
- Observing rules of the facility during his or her stay. Following the treatment plan established by the physician, including the instructions of nurses and other healthcare professionals.
- Be considerate of other patients and personnel and respecting the property of others and the facility.
- Reporting whether or not he or she understands the planned course of treatment and what is expected of him or her.
- Promptly fulfilling his or her financial obligations to the facility

Signature confirms notification of patient rights and responsibilities.

☐ Patient Signature

☐ Patient Representative

Date