

PATIENT'S BILL OF RIGHTS

Every patient has the right to be treated as an individual with his rights respected. We want to assure that the rights of all patients coming to the Center are respected without regard to sex, culture, economic status, education handicap, race, color, age, or religious background.

Patient Rights:

- To receive treatment without discrimination as to race, color, religion, sex, national origin, disability, or source of payment.
- To receive consideration and respectful care from competent personnel in a clean and safe environment. To be free from mental, physical, sexual and verbal abuse, neglect, and exploitation and free from use of unnecessary restraints. Drugs and other medications shall not be used for discipline of patients or for convenience of facility personnel.
- To understand the indications for the procedure. To receive all the information they need to give informed consent for any procedure, including the possible risks and benefits of the procedure.
- To receive complete information regarding diagnosis, planned treatment and prognosis, as well as alternative treatments/procedures and the possible risks/side effects associated with treatment. If medically inadvisable to disclose to the patient such information, the information is given to a person designated by the patient or to a legally authorized individual.
- To participate in all decisions involving health care, except when such participation is contra-indicated for medical reasons.
- To refuse treatment in accordance with laws and regulations and to be told what affects this may have on their health.
- To assure safe use of equipment by trained personnel.
- To be provided privacy, confidentiality and integrity of all information and records regarding their care.
- To be provided privacy, safety and security of self and belongings during the delivery of patient care service.
- To have the right to access information contained in their medical record. To approve or refuse the release of their medical records except when it is required by law and to ask for an accounting of such.
- To be aware of fees for service and the billing process.
- To complain without fear of reprisals about the care and services that they are receiving.
- Has the right to be informed of any research or experimental projects and to refuse participation without compromise to the patient's usual care.
- The right to continuity of health care. The physician may not discontinue treatment of a patient as long as further treatment is medically indicated, without giving the patient sufficient opportunity to make alternative arrangements.
- To be informed if the facility has authorized other healthcare and educational institutions to participate in the patient's treatment. The patient also shall have a right to know the identity and functions of this institution and to refuse to allow their participation in the patient's treatment.

- To be assured that in the event of needed long-term care; this organization will provide the mechanisms to help advance the development of continuing quality care for those patients who require it.
- The right to appropriate assessment and management of pain.

Patient Responsibilities:

- To provide accurate past and present medical history present complaints, past illnesses, hospitalizations, surgeries, existence of advance directives, medication and other pertinent data.
- For asking questions when they do not understand something regarding their care or treatment.
- For assuring that the financial obligations for health care rendered are paid in a timely manner.
- For their actions if they should refuse a treatment or procedure, or if they do not follow or understand the instructions given them by the physician or Center employee.
- For keeping their procedure appointment. If they anticipate a delay or must cancel, they will notify the Center as soon as possible.
- For the disposition of their valuables, as the Center does not assume this responsibility.
- For showing respect and consideration to other people and property.

The Center regards the doctor-patient relationship to be sacred requiring trust, mutual respect, and confidentiality. To that end, if you have any comment, grievance or complaint regarding the care you received by this facility or a physician or employee of this facility, please voice your concern by letter or telephone call to:

Barbara Pedersen, RN, BS, CGRN Center Director
 Endoscopic Surgical Centre of Maryland- North
 15005 Shady Grove Road, Suite 300
 Rockville, Maryland 20850
 301-762-1280(Voice) - 301-762-5678(Fax)

Office of Health Care Quality

Department of Health and Mental Hygiene
 Spring Grove Hospital Center
 Bland Bryant Building
 55 Wade Avenue
 Catonsville, Maryland 21228

Contact: Barbara Fagan

Phone Number: (410) 402-8000

Toll-free: 1-800-492-6005

Email: ohcqweb@dhmh.state.md.us

State website -<http://www.dhmh.maryland.gov/>

Sites for address and phone numbers of regulatory agencies:

Medicare Ombudsman website

www.medicare.gov/Ombudsman/resources.asp

The Center will not discriminate or use any concern or reprisal against you for taking action to solve a problem or voice a concern.

Physician Financial Interest and Ownership: The Center is owned, in part, by the physicians. The physician(s) who referred you to this Center and who will be performing your procedure(s) may have a financial and ownership interest. Patients have the right to be treated at another health care facility of their choice. We are making this disclosure in accordance with Federal regulations.

Advance Directives

You have the right to information on the Center's policy regarding Advance Directives.

Advance Directives will not be honored within the Center. In the event of a life-threatening event emergency medical procedures will be implemented. Patients will be stabilized and transferred to a hospital where the decision to continue or terminate emergency measures can be made by the physician and family.

If the patient or patient's representative wants their Advance Directives to be honored, the patient will be offered care at another facility that will comply with their wishes.

If you request, an official state Advance Directive Form will be provided to you. Forms can also be found at the Maryland Attorney General's Web Site <http://www.oag.state.md.us/Healthpol/AdvanceDirectives.htm>