

# Patient's Rights and Responsibilities

EVERY PATIENT HAS THE RIGHT TO BE TREATED AS AN INDIVIDUAL AND TO ACTIVELY PARTICIPATE IN AND MAKE INFORMED DECISIONS REGARDING HIS/HER CARE. THE FACILITY AND MEDICAL STAFF HAVE ADOPTED THE FOLLOWING PATIENT RIGHTS AND RESPONSIBILITIES, WHICH ARE COMMUNICATED TO EACH PATIENT OR THE PATIENT'S REPRESENTATIVE/SURROGATE PRIOR TO THE PROCEDURE/SURGERY.

## PATIENT RIGHTS

- Patients shall be treated with respect, consideration, and dignity.
- Patients shall be provided appropriate privacy.
- Patient records shall be treated confidentially and, except when authorized by law, patients shall be given the opportunity to approve or refuse their release.
- Patients shall be provided, to the degree known, appropriate information concerning their diagnosis, treatment, and prognosis. When it is medically inadvisable to give such information to a patient, the information shall be provided to a person designated by the patient or to a legally authorized person.
- Patients shall be given the opportunity to participate in decisions involving their health care, except when such participation is contraindicated for medical reasons.
- Information shall be available to patients and staff concerning:
  - Patients' rights
  - Patient conduct and responsibilities
  - Services available at the Center
  - Provisions for after-hours and emergency care
  - Fees for services
  - Payment policies
  - Patient's right to refuse to participate in experimental research
  - Methods of expressing complaints and suggestions to the Center
- Marketing or advertising regarding the competence and/or capabilities of the organization shall not be misleading to patients

## PATIENT RESPONSIBILITIES:

- To provide complete and accurate information to the best of their ability about their health, any medications, including over-the-counter products and dietary supplements and any allergies or sensitivities.
- To follow the treatment plan prescribed by their provider, including pre-operative and discharge instructions.
- To provide a responsible adult to transport them home from the facility and remain with them for 24 hours, if required by their provider.
- To inform their provider about any living will, medical power of attorney, or other advance healthcare directive in effect.
- To accept personal financial responsibility for any charges not covered by their insurance.

**If you need an interpreter:** If you will need an interpreter, **please let us know** and one will be provided for you. If you have someone who can translate confidential, medical and financial information for you please make arrangements to have them accompany you on the day of your procedure.

***The patient has the right to:***

- Exercise his or her rights without being subjected to discrimination or reprisal.
- Voice a grievance regarding treatment or care that is, or fails to be, furnished.
- Be fully informed about a treatment or procedure and the expected outcome before it is performed.
- Confidentiality of personal medical information.

***The patient has the right to:***

- Personal privacy
- Receive care in a safe setting
- Be free from all forms of abuse or harassment

**Complaints/Grievances:** If you have a problem or complaint, please speak to one of our staff to address your concern. If necessary, your problem will be advanced to center management for resolution. You have the right to have your verbal or written grievances investigated and to receive written notification of actions taken.

The following are the names and/or agencies you may contact:

Russell Mann RN, BSN – Center Director  
364 Richland West Circle, Suite B  
Waco, TX 76712  
[rmann@amsurg.com](mailto:rmann@amsurg.com)

You may contact the state to report a complaint:

Health Facility Compliance Group (MC 1979)  
Texas Department of State Health Services  
PO Box 149347  
Austin, TX 78714-9347  
Complaint Hotline: 888-973-0022  
Fax: 512-776-7111  
Email: [hfc.complaints@dshs.state.tx.us](mailto:hfc.complaints@dshs.state.tx.us)  
State Web site: <http://www.dshs.state.tx.us/license.shtm>

Medicare beneficiaries may also file a complaint with the Medicare Beneficiary Ombudsman. **Medicare Ombudsman Web site:** [www.medicare.gov/Ombudsman/resources.asp](http://www.medicare.gov/Ombudsman/resources.asp)  
**Medicare:** [www.medicare.gov](http://www.medicare.gov) or call 1-800-MEDICARE (1-800-633-4227)

**Office of the Inspector General:** <http://oig.hhs.gov>

This facility is accredited by the Accreditation Association for Ambulatory Health Care (AAHC). Complaints or grievances may also be filed through:  
AAHC, 5250 Old Orchard Road, Suite 200, Skokie, IL 60077, 847-853-6060 or email: [info@aaahc.org](mailto:info@aaahc.org)

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