
PATIENT RIGHTS AND RESPONSIBILITIES NOTIFICATION

PATIENT RIGHTS

- a. Our Centers are owned by Charles E. Allen MD, Scott A. Clark MD, Sheraj Jacob MD, John Kalarickal MD, Namita Pareek MD, Vinayasekhara M. Reddy MD, Neeraj Sharma, MD and Ankur Sheth MD. All staff physicians retain privileges at these Centers. The Patient will be provided with a copy of the "Patient Rights and Responsibilities" prior to the date of the procedure. The provision of this form is delegated to the main office which shall provide a copy of the form to the patient prior to the procedure. Patients will indicate whether or not they have received such by completing and initialing the appropriate section of the "Advanced Directive/Patient Rights Acknowledgement" consent form.
- b. The privacy of all patients shall be respected at all times. Patients shall be treated with respect, consideration, and dignity.
- c. Patients shall receive assistance in a prompt, courteous, and responsible manner.
- d. Patient medical records are considered confidential. Except as otherwise required by law, patient records and/or portions of records will not be released to outside entities or individuals without patients' and/or designated representatives' express written approval.
- e. Patients have the right to know the identity and status of individuals providing services to them.
- f. Patients have the right to change providers if they so choose to do so.
- g. Patients, or a legal authorized representative, have the right to information that is thorough, current and understandable regarding their diagnosis, treatment options and prognosis (if known), and follow-up care. All patients will sign an informed consent after all information has been provided and their questions are answered.
- h. When it is medically inadvisable to give such information to the patient, the information is provided to a person designated by the patient or to a legally authorized person.
- i. Unless participation is medically contraindicated, patients have the right to participate in all decisions involving their healthcare.
- j. Patients have the right to refuse treatment and to be advised of the alternatives and consequences of their decisions.
- k. Patients are encouraged to discuss their objectives with their provider.
- l. Patients have the right to refuse participation in experimental treatments and procedures. Should any experimental treatment or procedure be considered, it shall be fully explained to the patient prior to commencement.
- m. Patients have the right to make suggestions or express complaints about the care/the lack of care, they have received and to submit their grievance (verbal or written), to the Center Administrator or Clinical Supervisor who will complete an "Incident Notification" and bring the issue to the attention of the Medical Director in a timely manner so the grievance may be addressed.
- n. All alleged violations/grievances relating, but not limited to, mistreatment, neglect, verbal, mental, sexual, or physical abuse, must be fully documented.
- o. Patients will be informed about procedures for expressing suggestions, complaints, and grievances, including those required by state and federal regulations.
- p. Patients have the right to be provided with information regarding emergency after-hours care.
- q. Patients have the right to obtain a second opinion regarding the recommended procedure. Responsibility for the expense of the second opinion rests solely with the patient.
- r. Patients have the right to a safe and pleasant environment during their stay.
- s. Patients have the right to have visitors at the Center as long as visitation does not encumber Center operations and the rights of other patients are not infringed.
- t. Patients have the right to have procedures performed in the most painless way possible.
- u. Patients have the right to an interpreter if required.
- v. Patients have the right to be provided informed consents as required by the laws of the State of Georgia.
- w. Patients have the right to truthful marketing and/or advertising regarding the competence and capabilities of the Center and its staff.
- x. Patients have the right to copies of their "Advanced Directives: and "Living Wills" in their medical record. Center staff shall honor these wishes to the extent feasible. However, due to the Center's limited capabilities, in the event of an emergency, the patient will be transferred to Northeast Georgia Health Systems at which the attending physician will have privileges. Hospital staff will be informed of the existence of the Advance Directives and such will be provided if available.

- y. Patients will be provided, upon request, all available information regarding services available at the Center, estimated fees, and options for payment.
- z. All patients will sign an informed consent after all information has been provided, their questions are answered in a language and manner that the patient or the patient’s representative understands, prior to the date of the procedure,
- aa. Patients have the right to be free from all forms of abuse or harassment.
- bb. Patients have the right to exercise his or her rights without being subjected to discrimination or reprisal.
- cc. Patients have the right to approve the release of their medical records to other healthcare providers, legal representatives, and other persons authorized by the patient.
- dd. Patients have the right to change providers if other qualified providers are available.

PATIENT RESPONSIBILITIES

- a. Patients are expected to provide complete and accurate medical histories (including providing information on all current medications), keep all scheduled pre/post-procedure appointments, and comply with treatment plans to help ensure appropriate care.
- b. Patients are responsible for reviewing and understanding the information provided by their Physician or nurse.
- c. Patients are responsible for understanding their insurance coverage and the procedures required for obtaining coverage.
- d. Patients are responsible for providing insurance information at the time of service and to notify the receptionist of any changes to information regarding their insurance or medical information.
- e. Patients are responsible for paying all charges for co-payments, co-insurance, and deductibles on any non-covered services at the time of service unless other arrangements have been made in advance with the Medical Practice.
- f. Patients are responsible for treating Clinic Physicians and Staff in a courteous and respectful manner.
- g. Patients are responsible for asking questions about their medical care and to seek clarification from their physician of the services to be provided until they fully understand the care they are to receive.
- h. Patients are responsible for following the advice of their provider and to consider the alternatives and/or likely consequences if they refuse to comply.
- i. Patients are responsible for expressing their opinions, concerns, or complaints in a constructive manner to the appropriate personnel at the Center.
- j. Patients are responsible for notifying their health care providers of patient’s Advance Directives, Living Wills, medical Power of Attorney, or any other directives that could affect their care.
- k. Patients are responsible for having a responsible adult transport them from the Center and remain with them as directed by the physician.
- l. Patients will be provided with a copy of the Patient Rights and Responsibilities prior to the date of the procedure. The provision of this form is delegated to the main office. A copy shall be provided to the patient. The patient shall indicate receipt of such on the “Acknowledgement Form”.
- m. The patient or family may voice concerns or complaints without having care affected in any way. They may discuss their concerns with their doctor, nurse, or other caregiver. If concerns are not resolved, they should contact the Center Director at (678) 997-2160, or the Practice Administrator at (678) 997-2105. If preferred, the patient/caregiver may contact the Section Head of the Acute Care Section of the Healthcare Facility Regulation Division of the Georgia Department of Community health at (404) 657-5728 or at (800) 878-6442, or 2 Peachtree Street NW, 31-447, Atlanta, Georgia 30303 or their Ombudsman at www.cms.hhs.gov/Center/ombudsman.asp.

Complaints can be submitted to the following:	Against Physicians:
DCH-HFRD 2 Peachtree Street Atlanta, GA 30303 Phone: (800) 878-6442 Email: dhr.georgia.gov	Composite Board of Medical Examiners Complaints Unit 2 Peachtree Street, NW 36 th Floor Atlanta, GA 30303 Phone: (404) 463-8902

For Medicare concerns please notify the following:
 Office of the Medicare Beneficiary Ombudsman
 Email: <http://www.cms.hhs.gov/ombudsman/resources.asp>
 Or www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombuds