

## **PACIFIC HILLS SURGERY CENTER PATIENT RIGHTS AND RESPONSIBILITIES**

Pacific Hills Surgery Center has established this Patient's Bill of Rights as a policy with the expectation that observance of these rights will contribute to more effective patient care and greater satisfaction for the patient, his/her physician, and the facility organization. It is recognized that a personal relationship between the physician and the patient is essential for the provision of proper medical care. The traditional physician-patient relationship takes on a new dimension when care is rendered within an organized structure. Legal precedent has established that the facility itself also has a responsibility to the patient. It is in recognition of these factors that these rights are affirmed.

No catalog of rights can guarantee the patient the kind of treatment he has a right to expect. This facility has many functions to perform, including the prevention and treatment of disease, the education of both health professionals and patients. All these activities must be conducted with an overriding concern for the patient, and above all, the recognition of his/her dignity as a human being. Success in achieving this recognition assures success in the defense of the rights of the patient.

### **AS A PATIENT, YOU HAVE THE RIGHT TO:**

- Considerate, respectful care at all times and under all circumstances with recognition of your personal dignity.
- Personal and informational privacy and security for self and property.
- When the need arises attempts will be made for healthcare professionals and other staff members to communicate in the language or manner primarily used by the patient.
- Have a surrogate (parent, legal guardian, person with medical power of attorney) exercise the Patient Rights when you are unable to do so, without coercion, discrimination or retaliation.
- Confidentiality of records and disclosures and the right to access information contained in your clinical record. Except when required by law, you have the right to approve or refuse the release of records.
- Information concerning your diagnosis, treatment and prognosis, to the degree known.
- Participate in decision involving your healthcare and be fully informed of and to consent or refuse to participate in any unusual, experimental or research project without compromising your access to services.
- Make decision about medical care, including the right to accept or refuse medical or surgical treatment without coercion, discrimination or retaliation. The patient has the right to ask for a change in medical provider if they are not satisfied.
- Be free from all forms of abuse and harassment.
- Competent, caring healthcare providers who act as your advocates and treats your pain as effectively as possible.
- Know the identity and professional status of individuals providing services and be provided with adequate education regarding self-care at home, written in language you can understand.
- Be free from unnecessary use of physical or chemical restraint and or seclusion as a means of coercion, convenience or retaliation.
- Know the reasons for transfer either inside or outside the facility.
- Impartial access to treatment regardless of race, age, color, sex, national origin, religion, handicap, or disability.
- Receive an itemized bill for all services within a reasonable period of time and be informed of the source of reimbursement and any limitations or constraints placed upon your care.

- File a grievance with the facility by contacting the Clinical Director, via telephone or in writing, when you feel your rights have been violated.

24022 Calle De La Plata Ste 180, Laguna Hills, CA 92653 (949) 458-3551  
 Kristi Morse, R.N., Ext 22165 Dan Corbett, Administrator, Ext 22164

- Report any comments concerning the quality of services provided to you during the time spent at the facility and receive fair follow-up on your comments.
- Know about any business relationships among the facility, healthcare providers, and others that might influence your care or treatment.
- File a complaint of suspected violation of health department regulations and/or patient rights. Complaints may be filed at:

Medical Board of California Consumer Complaints  
 (800) 633-2322 (This is posted in the waiting area in larger print)

California Department of Public Health – Orange County Office – 681 S. Parker St., Ste 200,  
 Orange, CA 92868 1-800-228-5234 1-714-567-2906 FAX 1-714-567-2815

**Office of the Medicare Beneficiary Ombudsman**

**The written notice of patient rights and responsibilities shall be posted in a place or places within the facility likely to be noticed by patients (or their representative, as applicable) waiting for treatment.**

**This notice must include: name, address and phone number of a State agency representative to whom patients can report complaints as well as the website for the Office of the Medicare Beneficiary**

**Ombudsman\* <http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html> 1-800-MEDICARE 1-800-633-4227**

**AS A PATIENT, YOUR CONDUCT, PARTICIPATION AND YOUR RESPONSIBILITY FOR:**

- Providing, to the best of your knowledge, accurate and complete information about your present health status and past medical history and reporting any unexpected changes to the appropriate physician(s).
- The care a patient receives is partially dependent on the patients conduct and participation. These responsibilities shall be presented to the patient in the spirit of mutual trust and respect.
- Following the treatment plan recommended by the primary physician involved in your case including the instructions of nurses and other health professionals, as they carry out the physician’s orders.
- The patient is responsible for making it known whether he/she clearly comprehends the course of his/her medical treatment and what is expected of him/her.
- Providing an adult to transport you home after surgery and an adult to be responsible for you at home for the first 24 hours after surgery, **if required by your physician.**
- The patient is responsible for keeping appointments and for notifying Pacific Hills Surgery Center or their physician when he/she is unable to do so.
- The patient is responsible for being considerate and respectful of the rights of other patients and facility personnel.
- Your actions if you refuse treatment, leave the facility against the advice of the physician, and/or do not follow the physician’s instructions relating to your care.
- Ensuring that the financial obligations of your healthcare are fulfilled as expediently as possible and accept personal financial responsibility for any charges not covered by his/her insurance.
- Providing information about, and/or copies of any living will, power of attorney or other directive that you desire us to know about.