



Patient Rights and Responsibilities

Patients, the Patient's Representative & the Patient's Health Care Surrogate have:

1. The right to considerate and respectful care, provided in a safe environment, free from all forms of abuse or harassment. These rights may be exercised without regard to sex or cultural, economic, educational or religious background or the source of payment for care
2. The right to full consideration of privacy concerning his/her medical care program. Health care professionals will conduct all confidential case discussions, consultations, examinations and treatments discretely. This includes the right to be advised of the reason for the presence of any individual involved in his/her healthcare
3. The right to confidential treatment of all communications and records pertaining to the patient's care and visit to the facility.
4. The right to access to information contained in his/her medical record within a reasonable frame of time, (within 48 hours of request, excluding weekends and holidays), to include information regarding diagnosis, evaluation, treatment and prognosis. If it is medically inadvisable to give such information to the patient, a person designated by the patient or a legally authorized person shall have access to the patient's information.
5. The right to participate in the development and implementation of the patient's plan of care and to actively participate in decisions regarding this medical care. To the extent permitted by law, this includes the right to request and/or refuse treatment. This right includes information from the patient's physician about a patient's illness, the planned course of treatment, (including unanticipated outcomes), and prospects for recovery in terms the patient can understand.
6. The right to know the physician performing the procedure may have financial interest or ownership in this ASC. Disclosure of this information will be in writing and furnished prior to the start of the procedure in a language and manner the patient, the patient representative or the patient's surrogate understands.
7. The right to services provided at the facility and reasonable responses to any reasonable request the patient, the patient representative or the patient's surrogate may make for service.
8. The right to continuing healthcare requirements and instructions following the patient's discharge from the facility. The facility services are not intended for emergency care; therefore, all practitioners will direct after hours' care to the closest emergency room. The patient has the right for continuing care after hours or overnight. If care is not available at the ASC, the patient will be transferred to a hospital.
9. The right to examine and receive the fees for service. Upon request and prior to the initiation of care or treatment, the right to receive an estimate of the facility charges, potential insurance payments and an estimate of any co- payment, deductible, or other charges not paid by insurance.
10. The right to refuse to participate in experimental research.
11. The right to a written copy of the facility's policy on advance directives in a language and manner the patient, the patient's representative or the patient's surrogate understands. Information concerning advance directives will be made available to the patient, the patient representative or the patient's surrogate, including a description of the state laws regarding advance directives and official state advance directive forms if requested. Documentation of whether the individual has executed an advance directive will be placed in each patient chart.
12. The right to knowledge of the medical staff credentialing process, upon request.
13. The right to knowledge of the name of the physician who has primary responsibility for coordinating the patient's care and the names and professional relationships of other physicians and healthcare providers who will care for the patient and perform the procedure. The patient has the right to change the primary physician if another is available.
14. The right to understandable marketing or advertising methods used by the facility identifying the competence and skill of the organization.
15. The right to as much information about any proposed treatment or procedure as needed in order to give informed consent or to refuse the course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved in the treatment, any alternate courses of treatment or non-treatment and the risks involved in each.
16. The right to know whether the patient's physician has appropriate liability insurance coverage or if the physician does not carry malpractice insurance.
17. The right to be advised of the facility's grievance process should the patient wish to communicate a concern regarding treatment or care delivered
18. Be informed of his/her right to discontinue care or to leave the facility against the physician's advice as well as to be advised of any risks to the patient when discontinuing care or leaving the facility.
19. The right to appropriate assessment and management of pain.
20. The right to remain free from seclusion or restraints of any form not medically necessary or that are used as a means of coercion, discipline, convenience, or retaliation by staff.
21. The right to have a family member notified of the patient's admission as well as notification of the patient's personal physician, if requested.
22. The right to express spiritual and cultural beliefs.



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23. The right to information regarding the patient's outcomes of care including unexpected outcomes.

Pediatric Patient, the Patient's Representative/Family & the Patient's Health Care Surrogate have:

1. The right to expect respect for each child and adolescent as a unique individual and respect for the care-taking role and individual response of the parent
2. The right for provisions for normal physical and physiological needs of a growing child to include nutrition, rest, sleeps, warmth, activity and freedom to move and explore.
3. The right to consistent, supportive and nurturing care which meets the emotional and psychosocial needs of the child and fosters open communication
4. Provision for self-esteem needs that will be met by attempts to give the child the reassuring presence of a caring person, especially a parent, freedom to express feelings or fears with appropriate reactions, as much control as possible over both self and situation, opportunities to work through experience before and after each occurs, verbally, in play or in other appropriate ways, and recognition and reward for coping well during difficult situations.
5. Provision for varied and normal stimuli of life that contributes to cognitive, social, emotional and physical developmental needs, such as play, educational and social activities essential to all children and adolescents.
6. Information about what to expect prior to, during and following procedure/experience and support in coping with it.
7. Participation of children/families in decisions affecting their own medical treatment.

Patient, the Patient's Representative & the Patient's Health Care Surrogate Responsibilities:

1. Responsible to provide accurate and complete information concerning the patient's present complaints, past illnesses and hospitalizations, and other matters relating to his/her health.
2. Responsible for reporting perceived risks in the patient's care and unexpected changes in the patient's condition to the responsible practitioner.
3. Responsible for asking questions concerning the information presented by a staff member about the patient's care or what the patient is expected to do
4. Responsible for following the treatment plan established by the patient's physician, including the instructions of nurses and other health professionals who carry out the physician's orders.
5. Responsible for keeping appointments and for notifying the facility or physician when the patient is unable to do so.
6. Responsible for providing healthcare insurance information and assuring the financial obligations of the patient's care are fulfilled as promptly as possible.
7. Responsible for the consequences if the patient refuses treatment or fails to follow the practitioner's instructions.
8. Responsible for following facility policies and procedures.
9. Responsible for being respectful and considerate of other patients and organizational personnel.
10. Responsible for being respectful of the belongings of others in the facility
11. Family members shall have the responsibility to be available to participate in decision-making and providing staff with knowledge of family whereabouts. Parents/family have the responsibility to continue their parenting role to the extent of their ability.

These rights and responsibilities listed here and on the previous page outline the basic concepts of service at the Amelia Island Surgery Center, LLC. If you believe, at any time, our staff has not met one or more of the statements during your care here, please ask to speak to the Medical Director or Clinical Administrator. We will make every attempt to understand your complaint/concern. We will correct the issue you have if it is within our control, and you will receive a written response.

Danielle King, Clinical Administrator

If you have concerns about patient safety or quality care in the Amelia Island Surgery Center, you may contact any of the following organizations:

Florida Agency for Health Care Administration: <http://ahca.myflorida.com/Contact/index.shtml>

1-888-419-3456

Web site for the Office of the Medicare Beneficiary Ombudsman.

Medicare: 1-800-Medicare (Ombudsman) @ <http://www.medicare.gov/navigation/help-and-support/ombudsman.aspx> or <http://www.cms.hhs.gov/ombudsman/resources.asp>

Accreditation Association for Ambulatory Health Care (AAHC) which Accredits Amelia Island Surgery Center Contact:

1-847-853-6060 <https://www.aaahc.org/>