## **Mountain Home Surgery Center**

## **PATIENT RIGHTS**

## As a Patient, you have the right to:

- Considerate and respectful care at all times and under all circumstances with recognition of your personal dignity.
- Impartial access to treatment regardless of race, age, sex, ethnicity, religion, sexual orientation or disability.
- Personal and informational privacy and security for self and property.
- 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.
- The knowledge of the name of the physician who has primary responsibility for coordinating your care, and the names and professional relationships of other physicians who will see you.
- 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.
- 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 decisions 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 after being adequately informed of the benefits, risks and alternatives, without coercion, discrimination or retaliation.
- Competent and caring healthcare providers who act as your advocate and treat your pain as effectively as possible.
- Know the identity and professional status of individuals providing service 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.
- 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 between the facility, healthcare providers, and others that might influence your care or treatment.
- File a grievance with the facility by contacting the Administrator or Surgery Center Supervisor, via telephone or in writing, when you feel your rights have been violated: 360 Highway 5 N, Mtn Home, AR 72653; 870-580-0944 or toll free 800-451-3315;
- File a complaint of suspected violations of Health Department regulations and/or patient rights. Complaints may be filed at: Office of the Medicare Beneficiary Ombudsman, 800-633-4227; http://www.cms.hhs.gov/center/ombudsman.asp