

A PATIENT'S BILL OF RIGHTS

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 a new dimension when care is rendered within an organizational 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.

1. The patient has the right to be treated with dignity, and have considerate and respectful care.
2. The patient has the right to obtain from his/her physician complete current information concerning his/her diagnosis, treatment and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person in his/her behalf. The patient has the right to family input in care decisions. He/she has the right to know, by name, the physician responsible for coordinating his/her care.
3. The patient has the right to receive from his/her physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include but not necessarily be limited to the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternative, the patient has the right to know the name of the person responsible for the procedures and/or treatment.
4. The patient has the right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of his/her action.
5. The patient has the right to every consideration of his/her security, spiritual care, privacy concerning his/her medical care program. For patient complaints about their care and treatment, without fear of retribution or denial of care, and for timely resolutions, call Administrator (253) 848-3000. Case discussion, consultation, examination, and treatment are confidential and should be conducted discretely. Those not directly involved in his/her care must have permission of the patient to be present.

HSQA Complaint Intake

PO Box 47857

Olympia, WA 98504-7857

Phone: 360-236-4700

Toll Free: 800-633-6828

Fax: 360-236-2626

Email: HSQAComplaintIntake@doh.wa.gov

Medicare Help and Support

1-800-MEDICARE

Office of the Medicare Beneficiary Ombudsman

<http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>

6. The patient has the right to be protected from abuse and neglect, and have access to protective services.
7. The patient has the right to expect that all communications and records pertaining to his/her care should be treated as confidential, and any unanticipated outcomes be disclosed in the post-op period.
8. The patient has the right to expect that within its capacity, this ambulatory surgery facility must provide evaluation, and/or referral as indicated by the urgency of the case. When medically permissible, a patient may be transferred to another facility only after he/she has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer.
9. The patient has the right to obtain information as to any relationship of this facility to other health care and educational institutions insofar as his/her care is concerned. The patient has the right to obtain information as to the existence of any physician directives, professional relationships or affiliations among individuals, by name, who are treating him/her.
Our physicians and their financial interest in the company:

| | | | |
|---------------------------|-------|----------------------------|-------|
| Steven M. Brady, M.D. | 6.66% | | |
| Keith F. Dahlhauser, M.D. | 6.66% | Dennis D. Drouillard, M.D. | 6.66% |
| Rachael D. Elrod, M.D. | 0.00% | Evelyn X. Fu, M.D | 6.66% |
| Laurel R. Harris, M.D. | 6.66% | Roy J. Park, M.D. | 6.66% |
| Michael W. Rausch, M.D. | 6.66% | Jerry R. Shields, M.D. | 6.66% |

10. The patient has the right to be advised if this ambulatory surgery facility proposes to engage in or perform human experimentation affecting his/her care or treatment. The patient has the right to refuse to participate in such research projects.

11. The patient has the right to expect reasonable continuity of care. He/she has the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect that this facility will provide a mechanism whereby he/she is informed by his physician of the patient's continuing health care requirements following discharge.

12. The patient has the right to examine and receive an explanation of his/her bill regardless of the source of payment.

13. The patient has the right to know what facility rules and regulations apply to his/her conduct as a patient.

14. The patient and/or patient's guardian has the right to exercise all rights without fear of retribution, discrimination, or reprisal.

No catalog of rights can guarantee for the patient the kind of treatment he/she has a right to expect. This facility has many functions to perform, including the prevention and treatment of disease and 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.

PATIENT RESPONSIBILITIES

It is the patient's responsibility to fully participate in decisions involving his/her own health care and to accept the consequences of these decisions if complications occur.

The patient is expected to follow up on his/her doctor's instructions, take medication when prescribed, and ask questions concerning his/her own health care that he/she feels is necessary.

ADVANCE DIRECTIVE POLICY

Cascade Laser & Surgery Center recognizes and respects all patients Advance Directives, and will review them with each individual patient. Patients will be asked if they have an advance directive prior to surgery and the patient will need to provide the supporting documents, if necessary. However, it is the policy of Cascade Laser & Surgery Center not to honor a DNR order. Therefore, Cascade Laser & Surgery Center will always attempt to resuscitate and stabilize a patient, then transfer them to Good Samaritan Hospital. Copies of their advance directive and chart documents will be sent to the hospital, at which time their advance directives may be followed.

All patients will be given a copy of this policy prior to surgery. It will be included with the Patient Bill of Rights.