

Patient Rights

You have the right as a patient to be informed about your condition and the recommended surgical, medical or diagnostic procedure to be performed so that you may make the decision whether or not to undergo the procedure after knowing the risks, benefits, and alternatives. Your physician should discuss these with you prior to the procedure and give you the opportunity to ask any questions that you may have. A member of the surgery center staff will also review this information with you to ensure your full understanding.

Wasatch Endoscopy Center, Medical Staff and Governing Body have adopted the following statement of patient rights and responsibilities.

- A. Be informed of his or her rights as a patient in advance of, receiving care. The patient may appoint a representative to receive this information should he or she so desire.
- B. Exercise these rights without regard to sex or cultural, economic, educational or religious background or the source of payment for care.
- C. Considerate, respectful and dignified care, provided in a safe environment, free from all forms of abuse, neglect, harassment and/or exploitation.
- D. Access protective and advocacy services or have these services accessed on the patient's behalf.
- E. Appropriate assessment and management of pain.
- F. Knowledge of the name of the physician who has primary responsibility for coordinating his/her care and the names and professional relationships of other physicians and healthcare providers who will see him/her. The patient has a right to change providers if other qualified providers are available.
- G. Be advised if the physician has a financial interest in the surgery center.
- H. Be advised as to the absence of malpractice coverage.
- I. Receive complete information from his/her physician about his/her illness, course of treatment, alternative treatments, outcomes of care (including unanticipated outcomes), and his/her prospects for recovery in terms that he/she can understand.
- J. Receive as much information about any proposed treatment or procedure as he/she may need 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, alternate courses of treatment or non-treatment and the risks involved in each and the name of the person who will carry out the procedure or treatment.
- K. Participate in the development and implementation of his or her plan of care and actively participate in decisions regarding his/her medical care. To the extent permitted by law, this includes the right to request and/or refuse treatment.
- L. Be informed of the facility's policy and state regulations regarding advance directives and be provided advance directive forms if requested.
- M. Full consideration of privacy concerning his/her medical care. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. The patient has the right to be advised as to the reason for the presence of any individual involved in his or her healthcare.
- N. Confidential treatment of all communications and records pertaining to his/her care and his/her stay at the facility. His/her written permission will be obtained before his/her medical records can be made available to anyone not directly concerned with his/her care.
- O. Receive information in a manner that he/she understands. Communications with the patient will be effective and provided in a manner that facilitates understanding by the patient. Written information provided will be appropriate to the age, understanding and, as appropriate, the language of the patient. As appropriate, communications specific to the

vision, speech, hearing cognitive and language-impaired patient will be appropriate to the impairment.

- P. Access information contained in his or her medical record within a reasonable time frame.
- Q. Be advised of the facility's grievance process, should he or she wish to communicate a concern regarding the quality of the care he or she receives. Notification of the grievance process includes: whom to contact to file a grievance, and that he or she will be provided with a written notice of the grievance determination that contains the name of the facility's contact person, the steps taken on his or her behalf to investigate the grievance, the results of the grievance and the grievance completion date. To file a grievance you may contact: *Diana McPherson, Administrator, ECO at 801 290-5241, The Utah Department of Health at 801-538-6152 or you may write to them at PO Box 42002, Salt Lake City, Utah 84114 or JCAHO at 800 994-6610 or you may write to them at Office of Quality Monitoring, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, IL 60181*
- R. Be advised of contact information for the state agency to whom complaints can be reported, as well as contact information for the Office of the Medicare Beneficiary Ombudsman.
Medicare Ombudsman: Toll free # 877-424-4640, Local # 801-538-3910
- S. Be advised if facility/personal physician 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. Refusal to participate or discontinuation of participation will not compromise the patient's right to access care, treatment or services.
- T. Full support and respect of all patient rights should the patient choose to participate in research, investigation and/or clinical trials. This includes the patient's right to a full informed consent process as it relates to the research, investigation and/or clinical trial. All information provided to subjects will be contained in the medical record or research file, along with the consent form(s).
- U. Be informed by his/her physician or a delegate of his/her physician of the continuing healthcare requirements following his/her discharge from the facility.
- V. Receive an explanation of his/her bill regardless of source of payment.
- W. Know which facility rules and policies apply to his/her conduct while a patient.
- X. Have all patient rights apply to the person who may have legal responsibility to make decisions regarding medical care on behalf of the patient.