PATIENT RIGHTS

- The PATIENT has the right to be treated with consideration, respect, and dignity.
- The PATIENT has the right to be provided appropriate privacy.
- The PATIENT, the PATIENT REPRESENTATIVE and/or surrogate has the right to all complete and current information concerning their diagnosis, evaluation, treatment and prognosis, in terms that he/she can understand. If not medically advisable to give information to the patient, the information shall be made available to a person designated by the patient or to a legally authorized person.
- The PATIENT has the right to know the credentials of health care professionals responsible for coordinating their care.
- The PATIENT has the right to participate in their own healthcare decisions except when such participation is contraindicated due to medical reasons.
- The PATIENT has the right to receive from the physician enough information including the treatment/procedure and expected outcome so that he/she may understand beforehand the services being rendered to sign the informed consent.
- The PATIENT has the right to refuse treatment and to be informed of the consequences of his/her actions.
- The PATIENT has the right to privacy and security of any individually identifiable health information or treatment concerning his/her own medical care.
- The PATIENT has the right to be informed of any persons other than authorized staff that would be observing or participating in his/her treatment and to refuse that observation and/or participation.
- The PATIENT has the right for all medical records to be treated as confidential and given the
 opportunity to approve or refuse their release unless it would be cause for a negative outcome in the
 continuation of medical care.
- The PATIENT has the right to information concerning the facility to which he/she may have to be transferred. The facility, that the patient is to be transferred to, must give approval prior to the patient transfer.
- The PATIENT has the right to know if any research will be done during his/her treatment and has the right to refuse it.
- The PATIENT has the right to expect quality care and service in a safe setting.
- The PATIENT has the right to accurate information regarding the competence, capabilities and services of the Center, its employees and medical staff.
- The PATIENT has the right to be informed of the mechanism by which he/she will have continuing health care and actions to take in the event the facility is closed or for a potential emergency following discharge from the Center.
- The PATIENT has the right to examine and receive an explanation of their bill, regardless
 of the source of payment.
- The PATIENT has the right to know, in advance, the expected amount of his/her bill, regardless of the source of the payment and any other necessary financial arrangements pertaining to their care.
- The PATIENT has the right to know what Rules and Regulations apply to his/her conduct, responsibilities and participation as a patient.
- The PATIENT has the right to expect reasonable attempts to communicate in their language or manner primarily used by them.
- The PATIENT has the right to exercise his or her rights without being subjected to discrimination or reprisal.
- The PATIENT has the right to be free from all forms of abuse or harassment.
- The PATIENT has the right to voice grievances regarding treatment or care that is (or fails to be) furnished as well as methods for providing feedback, compliments or complaints.
- The PATIENT, patient's representative and/or surrogate has a right to be provided written information pertaining to the facility-specific policy for advance directives. State-specific forms (as applicable to State health and safety laws for Advance Directives) will be provided upon request.
- The PATIENT has the right to know if physicians do not have malpractice insurance.

PATIENT RESPONSIBILITIES

- It is the PATIENT'S responsibility to read and understand all permits and/or consents to be signed. Either ask the nurse or physician to clarify any information not understood about your care or services.
- It is the PATIENT'S responsibility to provide complete and accurate information to the best of his/her ability about his/her health, any medications, including over-the-counter products and dietary supplements and any allergies or sensitivities.
- It is the PATIENT'S responsibility to notify the Center if you have a living will, medical power of attorney
 or other directive that could affect your care.
- It is the PATIENT'S responsibility to follow the treatment plan prescribed by his/her provider and to notify the Center on admission if pre-operative instructions have not been followed.
- The PATIENT is responsible for their own actions if they refuse treatment or do not follow preoperative instructions.
- It is the PATIENT'S responsibility to provide adult transportation to and from the Center and remain
 with him/her for 24 hours, appropriate to the medications and/or anesthesia to be given and according
 to preoperative instructions.
- It is the PATIENT'S responsibility to follow the post-operative instructions given by the physician(s) and/or nurses. This includes instructions regarding post-operative appointments.
- It is the PATIENT'S responsibility to contact the physician if any complications or unexpected outcomes
 occur.
- It is the PATIENT'S responsibility to assure all payments for services rendered are on a timely basis and ultimate responsibility is the patient's, regardless of the insurance coverage.
- It is the PATIENT'S responsibility to provide financial and/or insurance information regarding who will be responsible for the bill including current address and authorized contact information.
- It is the PATIENT'S responsibility to notify the administration of the Center, if the PATIENT, PATIENT REPRESENTATIVE and/or surrogate thinks their right(s) have been violated or if the PATIENT has a significant complaint.
- It is the PATIENT'S responsibility and those accompanying the PATIENT to be respectful of all health care providers and staff, as well as other patients and follow Center policies.
- It is the PATIENT'S responsibility to make known if they want to change providers and understand that they have a right to change their provider if other qualified providers are available.
- PATIENTS, PATIENT REPRESENTATIVES and/or surrogates should contact the Office of the Medicare Beneficiary Ombudsman for concerns @ www.cms.gov/center/ombudsman.asp or you may contact Medicare 1-800-633-4227. You can find the phone number for your state's SHIP by visiting Medicare.gov/contacts or by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

To file a complaint with the Alabama Department of Public Health call (334) 206-5876 or by visiting https://www.alabamapublichealth.gov/providerstandards/contact.html

Alabama Department of Public Health 201 Monroe Street Montgomery, AL. 36104 1-800-356-9596

Additionally, for complaints regarding discrimination based on race, color, national origin, sex, age or disability, you may contact:

Office of Civil Rights at 1-800-368-1019, 1-800-527-7697 (TDD) or by visiting https://ocrportal.hhs.gov/ocr/portal/lobby.jsf or by mail at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201