## DIGESTIVE CARE PHYSICIANS, LLC PATIENT RIGHTS

### **Patient Rights**

- a. Patient has the right to choose another facility for his/her procedure. The patient will be provided a copy of the Patient Rights and Responsibilities prior to the procedure. A copy is also located on the practice website. The provision of this form is delegated to the Medical Practice which shall provide a copy of the signed and dated form to the Centre prior to the procedure.
- b. Some or all of the health care professionals performing services in this Centre are independent contractors and are not Centre agents or employees. Independent contractors are responsible for their own actions and the Centre shall not be liable for the acts or omissions of any such independent contractor.
- c. The privacy of all patients shall be respected at all times. Patients shall be treated with respect, consideration and dignity.
- d. Patients shall receive assistance in a prompt, courteous, and responsible manner.
- e. Patient medical records are considered confidential. Except as otherwise required by law, patient records and/or portions of records will not be released to outside entities or individuals without patients' and/or designated representatives' express written approval. Patients are given the opportunity to approve or refuse the release of their medical records.
- f. Patients have the right to know the identity and status of individuals providing services to them.
- g. Patients have the right to change providers if they so choose. Patients are informed of the credentials of all staff who will be providing care during the patients' stay.
- h. Patients, or a legal authorized representative, have the right to thorough, current and understandable information regarding their diagnosis, treatment options and prognosis, if known, and follow-up care. All patients will sign an informed consent form after all information has been provided and their questions answered.
  - When it is medically inadvisable to give such information to the patient, the information is provided to a person designated by the patient or to a legally authorized person.
- i. Unless participation is medically contraindicated, patients have the right to participate in all decisions involving their healthcare.
- j. Patients have the right to refuse treatment and to be advised of the alternatives and consequences of their decisions. Patients are encouraged to discuss their objectives with their provider.
- k. Patients have the right to refuse participation in experimental treatment and procedures. Should any experimental treatment or procedure be considered, it shall be fully explained to the patient prior to commencement.
- l. Patients have the right to make suggestions or express complaints about the care they have received and to submit such to the Clinical Manager or Practice Administrator who will complete an "Incident Notification" and bring the issue to the attention of the Medical Director in a timely manner so the grievance may be addressed.
- m. Patients have the right to be provided with information regarding emergency and after-hours care.
- n. Patients have the right to obtain a second opinion regarding the recommended procedure. Responsibility for the expense of the second opinion rests solely with the patient.
- o. Patients have the right to a safe and pleasant environment during their stay.
- p. Patients have the right to have visitors at the Centre as long as visitation does not encumber Centre operations and the rights of other patients are not infringed.
- q. Patients have the right to have procedures performed in the most painless way possible.
- r. Patients have the right to an interpreter if required.
- s. Patients have the right to be provided informed consent forms as required by the laws of the State of Georgia.
- t. Patients have the right to truthful marketing and/or advertising regarding the competence and capabilities of the Centre and its staff
- u. Patients have the right to have copies of their "Advance Directives" and "Living Wills" in their medical records and to have Center staff honor these wishes to the extent feasible. However, due to the Center's limited capabilities, in the event of an emergency, the patient will be transferred to the nearest hospital at which attending physician has privileges. Hospital staff will be informed of the existence of the Advance Directives and such will be provided if the Center has copies.
- v. Patients will be provided, upon request, all available information regarding services available at the Centre, as well as information about estimated fees and options for payment.
- w. If applicable, patients will be informed of the absence of malpractice insurance coverage.
- x. Patients have the right to approve the release of their medical records to other care providers, legal representatives and other persons authorized by the patient.
- y. Patient has the right to exercise his/her rights without being subject to discrimination or reprisal.
- z. Patient has the right to be free from all forms of abuse or harassment.

Patient Name:	Date:
Patient Signature:	

# DIGESTIVE CARE PHYSICIANS, LLC PATIENT RESPONSIBILITIES

#### **Patient Responsibilities**

- a. Patients are expected to provide complete and accurate medical histories, to the best of their ability, including providing information on all current medications, over-the counter products and dietary supplements and any allergies or sensitivities.
- b. Patients are responsible for keeping all scheduled pre- and post-procedure appointments and complying with treatment plans to help ensure appropriate care.
- c. Patients are responsible for reviewing and understanding the information provided by their Physician or nurse. Patients are responsible for understanding their insurance coverage and the procedures required for obtaining coverage.
- d. Patients are responsible for providing insurance information at the time of their visit and for notifying the receptionist of any changes in information regarding their insurance or medical information.
- e. Patients are responsible for paying all charges for co-payments, co-insurance and deductibles or for non-covered services at the time of the visit unless other arrangements have been made in advance with the Administrative Director.
- f. Patients are responsible for treating Physicians, Staff and other patients in a courteous and respectful manner.
- g. Patients are responsible for asking questions about their medical care and to seek clarification from their Physician of the services to be provided until they fully understand the care they are to receive.
- h. Patients are responsible for following the advice of their provider and to consider the alternatives and/or likely consequences if they refuse to comply.
- i. Patients are responsible for expressing their opinions, concerns or complaints in a constructive manner to the appropriate personnel at the Centre.
- j. Patients are responsible for notifying their health care providers of patient's Advance Directives, Living Wills, Medical Power of Attorney or any other directives that could affect their care. In the event of an emergency, the patient will be transferred to the appropriate facility. The facility will be notified of the existence of the Advance Directive, if applicable, and will be provided with a copy.
- k. Patients are responsible for having a responsible adult transport them from the Centre and remain with the patient for twenty-four (24) hours, if required by the Physician.
- I. The patient will be provided a copy of the Patient Rights and Responsibilities prior to the date of the procedure. The provision of this form is delegated to the Medical Practice which shall provide a copy of the signed and dated form to the Centre prior to the procedure.

## PATIENT COMPLAINT OR GRIEVANCE

You and your family should feel you can always voice your concerns. If you share a concern or complaint, your care will not be affected in any way. The first step is to discuss your concerns with your doctor, nurse, or other caregiver. If you have concerns that are not resolved, please contact the Practice Administrator at (770)-227-2222.

To report a complaint or grievance, you can contact the Practice Administrator at 770-227-2222 or by mail at: Digestive Care Physicians, LLC 6300 Hospital Pkwy Ste 450 Johns Creek, GA 30097.

Complaints and grievances may also be filed through the: Department of Community Health, Division Chief, Healthcare Facility Regulation Division, 2 Peachtree St, NW, Suite 31, Atlanta, Georgia 30303, (404) 657-5728 or (800) 878-6442.

You may also file a complaint with the Georgia Board of Medical Examiners at (404) 656-3913 Medicare beneficiaries may also file a complaint or grievance with the Medicare Beneficiary Ombudsman at: www.cms.hhs.gov/center/ombudsman.asp or (800) Medicare

#### **Disclosure of Ownership Interest**

Digestive Care Physicians, LLC operates as a Medical Practice which provides endoscopic procedures. It is accredited by The Accreditation Association for Ambulatory Health Care, Inc. ("AAAHC"). The Practice is owned by Dr. Ranvir Singh and Dr. Stephen Rashbaum. Drs. Singh and Rashbaum have become owners due to the commitment to provide quality health care and services to patients at a more affordable cost. You have the right to choose where to receive services, including the following reasonable alternative source of services for the physician:

- Emory Johns Creek Hospital
- Northside Forsyth Hospital

Patient Name:	Date:
Patient Signature:	