



Capital City Surgery Center of Florida

A COVENANT SURGICAL PARTNER

Patient Rights

PATIENT RIGHTS INCLUDE, BUT ARE NOT LIMITED TO, THE RIGHT TO:

- Be informed of his or her rights as a patient prior to the start of the surgical procedure. The patient may appoint a representative to receive this information should he or she so desire.
- Exercise these rights without regard to age, race, sex, national origin, religion, culture, disability, economic status, or source of payment for care.
- Considerate, respectful and dignified care, provided in a safe environment, free from all forms of abuse, neglect, harassment or reprisal.
- Access protective and advocacy services or have these services accessed on the patient's behalf.
- Appropriate assessment and management of pain.
- 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.
- Change providers if other qualified providers are available.
- Be advised if the physician has a financial interest in the surgery center.
- Be advised as to the absence of malpractice coverage if applicable.
- 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.
- 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.
- Be informed of the facility's policy and state regulations regarding advance directives and be provided advance directive forms if requested by patient or directed by State regulations.
- 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.
- 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.
- Receive information in a manner that he/she understands. Communication 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 the Limited English Proficiency (LEP) patient will be appropriate for the patient.
- Access information contained in his or her medical record within a reasonable time frame.
- Be advised of the facility's grievance process, should he or she wish to communicate a concern regarding 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.
- Be advised of contact information for the state or federal agency to whom complaints can be reported, as well as contact information for the Office of the Medicare Beneficiary Ombudsman.
- If facility/personal physician proposes to engage in or perform human experimentation, research, clinical trials, or medical education 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.
- 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).
- 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.
- Examine and receive an explanation of his/her bill regardless of source of payment.
- Have all patient rights apply to the person who may have legal responsibility to make decisions regarding medical care on behalf of the patient.
- Patients and prospective patients may request from this facility and other health care providers a more personalized estimate of charges and other information. Patients and prospective patients should contact each health care practitioner who will provide services in the ASC to determine the health insurers and health maintenance organizations with which the health care practitioner participates as a network provider or preferred provider.
- The patient has a right to access quality and statistical data submitted to state agencies. This may be accessed via www.floridahealthfinder.gov.