

NOTICE OF PATIENTS RIGHTS AND RESPONSIBILITIES

Dr. Santiago is committed to providing care and service of the highest quality for our patients. We are also committed to treating our patients with respect and understanding. We value the opinions of the patient and families we serve. We encourage you to help us maintain our high standards by offering your comments.

This document is meant to inform our patients of their rights and responsibilities while undergoing medical care. To the extent permitted by law, patient rights may be delineated on behalf of the patient to his or her guardian, next of kin, or legally authorized responsible person if the patient: a) has been adjudicated incompetent in accordance with the law, b) is found to be medically incapable of understanding the proposed treatment or procedure, c) is unable to communicate his or her wishes regarding treatment, or d) is a minor. If there are any questions regarding the contents of this notice, please notify any staff member.

PATIENTS RIGHTS

Access to Care: You will be provided with impartial access to treatment and services within this practice's capacity, availability, and applicable law and regulation. This is regardless of race, creed, sex, national origin, religion, disability/handicap, or source of payment for care/services.

Respect and Dignity: You have the right to considerate, respectful care/services at all times and under all circumstances. This includes recognition of psychosocial, spiritual, and cultural variables that may influence the perception of your illness.

Privacy and Confidentiality: You have the right, within the law, to personal and informational privacy. This includes the right to:

- Be interviewed and examined in surroundings that assure reasonable privacy.
- Have a person of your own sex present during physical examination or treatment.
- Not remain disrobed any longer than is required for accomplishing treatment/services.
- Request transfer for another treatment room if a visitor is unreasonably disturbing.
- Expect that any discussion or consultation regarding care will be conducted discreetly.
- Expect all written communications pertaining to care will be treated as confidential.
- Expect medical records to be read only by individuals directly involved in care, quality assurance activities, or processing of insurance claims. No other persons will have access without your written authorization.

Personal Safety: You have the right to expect reasonable safety insofar as the office practices and environment are concerned.

Identity: You have the right to know the identity and professional status of any person providing service for your care.

Information: You have the right to obtain complete and current information about your diagnosis (to the degree known), treatment, and any known prognosis. This information should be communicated in terms that you understand.

Consultation: You have the right to information that enables you, in collaboration with the physician, to make treatment decisions.

- ❑ Consent discussions will include explanation of the condition, risks and benefits of treatment, as well as consequences of no treatment.
- ❑ You will not be subjected to any procedure without providing voluntary, verbal or written consent.

Charges: Regardless of the source of payment for care provided, you have the right to request and receive an itemized and detailed explanation of any billed services.

Rules and Regulations: You will be informed of practice rules and regulations concerning your conduct as a patient at this facility. You are further entitled to information about the initiation, review, and resolution of patient complaints.

PATIENTS RESPONSIBILITIES

Keep Us Accurately Informed: You are responsible to provide, to the best of your knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to your health, including unexpected changes in your condition.

Follow Your Treatment Plan: You are responsible for following the treatment plan recommended by the physician. This may include following the instructions of health care personnel as they carry out the coordinated plan of care and implement the physician's orders.

Keep Your Appointments: You are responsible for keeping appointments and, when unable to do so for any reason, for notifying this practice.

Take Responsibility for Noncompliance: You are responsible for your actions if you do not follow the physician's instructions. If you cannot follow through with the prescribed treatment plan, you are responsible for informing the physician.

Be Responsible for Your Financial Obligations: You are responsible for assuring that the financial obligations of health care services are fulfilled as promptly as possible, and for providing up-to-date insurance information.

Be Considerate of Others: You are responsible for being considerate of the rights of other patients and personnel, and for assisting in the control of noise, smoking, and the number of visitors. You also are responsible for being respectful of practice property, and other persons visiting the office. Hygiene- use of perfume and colognes are discouraged because they trigger allergic reactions to patients that are allergic.

Be Responsible for Lifestyle Choices: Your health depends not just on the care provided at this facility but on the long-term decisions you make in daily life. You are responsible for recognizing the effects of these decisions on your health.