

PATIENT RIGHTS

A Patient has the right to respectful care given with dignity by competent personnel.

A Patient has the right, upon request, to be given the name of his attending practitioners, the names of all other practitioners directly participating in his care, and the names and functions of other health care persons having direct contact with the patient.

A Patient has the right to consideration of privacy concerning his own medical care program. Case discussion, consultation, examination, treatment, and medical records are considered confidential and shall be handled discreetly.

A Patient has the right to confidential disclosures and records of his medical care except as otherwise provided by law or third party contractual arrangement.

A Patient has the right to participate in decisions involving his health care except when such participation is contraindicated for medical reasons. A Patient has the right to refuse to participate in a research study.

A Patient has the right to know what BAHE's rules and regulations apply to his conduct as a patient.

The Patient has the right to expect emergency procedures to be implemented without unnecessary delay.

The Patient has the right to good quality care and high professional standards that are continually maintained and reviewed.

The Patient has the right to full information, in layman's terms, concerning diagnosis, evaluation, treatment and prognosis, including information about alternative treatments and possible complications. When it is not medically advisable to give the information to the patient, the information shall be given on his behalf to the person designated by the patient or to a legally authorized person.

Except for emergencies, the practitioner shall obtain the necessary informed consent prior to the start of a procedure.

A Patient has the right to refuse drugs or procedures, to the extent permitted by status. A practitioner shall inform the patient of the medical consequences of the patient's refusal of drugs or procedures.

A Patient has the right to medical and nursing services without discrimination based upon age, race, color, religion, sex, national origin, handicap, disability, or source of payment.

The Patient who does not speak English shall have access, where possible, to an interpreter.

The Center shall provide the patient, or patient designees, upon request, access to the information contained in his medical records, unless the attending practitioner for medical reasons specifically restricts access.

The Patient has the right to expect good management techniques to be implemented within the Center. These techniques shall make effective use of time for the patient and avoid personal discomfort of the patient.

When an emergency occurs and a patient is transferred to another facility, the responsible person shall be notified. The institution to which the patient is to be transferred shall be notified prior to the patient's transfer.

The Patient has the right to examine and receive a detailed explanation of his bill. Fees for services are available through our charge sheet which is accessible to every staff member and can be reviewed with any patient upon request.

A Patient has the right to expect that the Center will provide information for continuing health care requirements following discharge and the means for meeting them.

The Patient is informed of his/her right to change primary or specialty physician if another qualified physician is available.

A Patient has the right to review the credentials of the Professionals providing their care.

PATIENT RESPONSIBILITIES

Prior to receiving care, patients are informed of their patient responsibilities. These Responsibilities require the patient 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 as outlined in the Patient Rights and Responsibilities document given to every patient upon their initial visit, posted in the lobby and available on our website for print out.

Follow the treatment plan prescribed by his/her provider as outlined in the Patient Rights and Responsibilities document given to every patient upon their initial visit, posted in the lobby and available on our website for print out.

Provide a responsible adult to transport him/her home from the facility and remain with him/her for 24 hours, if required by his/her provider, as outlined in the Patient Rights and Responsibilities document given to every patient upon their initial visit, posted in the lobby and available on our website for print out.

Inform his/her provider about any living will, medical power of attorney, or other directive that could affect his/her care per the Patient Rights and Responsibilities document given to every patient upon their initial visit, posted in the lobby and available on our website for print out.

Accept personal financial responsibility for any charges not covered by his/her insurance as outlined in the Patient Rights and Responsibilities document given to every patient upon their initial visit, posted in the lobby and available on our website for print out.

Be respectful of healthcare workers and staff, as well as others patients as outlined in the Patient Rights and Responsibilities document given to every patient upon their initial visit, posted in the lobby and available on our website for print out.

PHYSICIAN'S OWNERSHIP DISCLOSURE

The patient is informed that Bay Area Houston Endoscopy is physician owned and has the freedom of choice in selection of facility or physician. The below physicians have a financial interest in Bay Area Houston Endoscopy Center: Sezen Altug, MD, Nikhil Inamdar, MD, Syed Jafri, MD, Advitya Malhotra, MD, Ravi Mani, MD, Stephen Marcum, MD, Manish Rungta, MD, Naveen Surapaneni, MD, Kalyanam Subramanyam, MD, Richard Warneke, MD, Gabriel Lee, MD, and Sudhanshu Gogia, MD.

BAY AREA HOUSTON ENDOSCOPY ADVANCE DIRECTIVE POLICY

In the ambulatory care setting, if a patient should suffer a cardiac or respiratory arrest or other life-threatening situation, the signed consent for the procedure implies consent for resuscitation and transfer to a higher level of care. Therefore, in accordance with Federal and State law, Bay Area Houston Endoscopy **will not** honor previously signed Advance Directives for any patient. If you disagree, you must address this issue with your physician prior to signing this form.

GRIEVANCE PROCESS

Grievances may be directed to the ASC Administrator, Angie Reeves, by mail or phone at the above listed address and phone number. In addition, you may contact Texas Dept. of State Health Services at 888-973-0022 or by mail at P.O.BOX 149347 Austin TX, 78714 or the Medicare Ombudsman Office at www.medicare.com

Signature

Date

Printed Name

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