

# Patient Rights and Responsibilities



Pickerington  
Surgery Center

In partnership with OhioHealth

## Patient Rights

### As a patient, you have the right:

1. To have your doctor and a family member or someone of your choice notified if you are admitted to a hospital, unless you ask that they not be notified.
2. To expect response to your requests and needs for treatment and service.
3. To receive competent and respectful care and treatment which includes addressing your social, psychological, cultural, emotional, and spiritual needs, regardless of your ability to pay.
4. To designate a representative to make healthcare decisions on your behalf.
5. To have your pain assessed, responded to promptly and treated.
6. To receive complete information about your diagnosis, prognosis, treatment and unplanned outcomes.
7. To have all information about your health status so that you (or your designee, if you wish) can be involved in and make decisions about your plan of care and treatment.
8. To know the names and the professional status of the people caring for you.
9. To ask any caregiver if they have relationships with outside parties that may influence your care.
10. To know the reasons for any proposed change in the professional staff caring for you.
11. To know the relationship(s) of Pickerington Surgery Center to other person(s) or organization(s) participating in your care.
12. To know the reasons for your transfer to a hospital.
13. To be informed if your plan of care and treatment includes experimental, research, or educational activities, and if so, to receive information on the procedure, benefits, discomforts, risks, and alternatives, along with assurance that your refusal to participate will not affect your care.
14. To accept or refuse any medical or surgical treatment, if allowed by law, and to be informed of the risks of any refusal, including forgoing or withdrawing life-sustaining treatment or withholding resuscitative services.
15. To make decisions about life-sustaining treatment as allowed by legal, clinical and ethical guidelines.
16. To execute Advance Directives (Living Wills, Health Care Power of Attorney Documents) in compliance with Ohio law, to designate a surrogate decision-maker on your behalf, and to have Pickerington Surgery Center comply with those directives.
17. To be in an environment that preserves your dignity, provides a positive self-image, and protects as much as possible your visual, auditory and personal privacy.
18. To be free from mental, physical, sexual, and verbal abuse, neglect and exploitation and, if needed, to receive help from Pickerington Surgery center in accessing protective and advocacy services.
19. To be free from restraints of any form that are not medically necessary or are used as a means of coercion, discipline, convenience or retaliation by staff.
20. To ask for an interpreter or help with any communication needs free of charge.
21. To have access to a telephone for private conversations unless communication is limited for effective therapy.
22. To expect confidentiality of your clinical and personal information pertaining to your care and to be able to access, request amendment to, and receive an accounting of disclosures regarding your health information permitted under law.
23. To have access to, within a reasonable time frame, your medical records except where restricted by law and Center policy.
24. To express to any of your caregivers any dissatisfaction you have with your care or service and to expect a response that includes an investigation into your complaint or concern.
25. To have access to your bill, itemized when possible, to ask for help understanding that bill, and to know that the bill will list only the charges for care you received.
26. To be informed of the source of Pickerington Surgery Center's reimbursement for your services and of any limitations which may be placed on your care.
27. To ask for your own copy of the Patient Rights and Responsibilities along with help in understanding how it applies to you.
28. To designate and receive visitors.
2. To ask questions when information is not understood.
3. Provide complete and accurate information about your health, any medications, including over-the-counter products and dietary supplements and any allergies you might have.
4. To cooperate with doctors and Pickerington Surgery Center staff.
5. To follow all Pickerington Surgery Center policies, including those addressing smoking, visiting and other matters.
6. To take responsibility for the payment of your medical bills or to provide all needed information so that your medical bills may be paid.
7. To show respect and consideration.
8. To understand that you will assume the responsibility for the outcome of your medical condition if you do not follow the care, treatment, and service plan recommended.
9. To have a responsible adult transport you home from the surgery center and remain with you for 24 hours, if required by your physician.

### How to Complain About Our Privacy Practices.

Pickerington Surgery Center acknowledges that a patient may wish to file a formal grievance related to their care or other services. Grievances are taken very seriously and will go through a thorough investigation and ultimately a formal review by a multi-disciplinary Grievance Committee.

You may file a grievance by:

- a) Calling Pickerington Surgery Center at 614.604.7444.
- b) Contacting the Ohio Department of Health by way of its Health Care Facility Complaint Hotline at 1.800.342.0553, HCComplaints@odh.ohio.gov, or by writing to them at 246 N. High Street, Columbus, Ohio 43215
- c) Contacting The Joint Commission at: complaint@jointcommission.org, or by phoning 800.994.6610.
- d) Contacting the Medicare Ombudsman by way of its Complaint Hotline at 1.800.633.MEDICARE (633.4227) or www.medicare.gov (ombudsman link is on the left hand column).

## Patient Responsibilities

### As a patient, you have the responsibility:

1. To answer questions thoroughly about your health and medical history.