

PainCare Medical Group (15701 Rockfield Blvd., Irvine, Ca. 92618, 949-457-9900) has adopted the following

## **PATIENT RIGHTS AND RESPONSIBILITIES**

### **Patient Rights:**

- Be treated with considerate, dignified and respectful care.
- Impartial treatment without regard to gender, culture, race, color, education, national origin, religion, handicap or disability and without fear of discrimination or reprisal.
- Full consideration of privacy concerning medical care. Care is confidential and will be conducted discretely. Be provided appropriate privacy and confidentiality concerning your medical care.
- To participate actively in decisions regarding your medical care, including obtaining timely diagnosis, evaluation, treatment and prognosis information you need to give informed consent before any treatment or procedure. This includes the right to refuse treatment.
- You have the right to leave the facility even against medical advice.
- To expect reasonable continuity of care including after-care and emergency instructions and contacts.
- You will not be discharged or transferred to another facility without prior notice, except in the case of a medical emergency and within the limits of legal regulations.
- To be advised if the physician proposes to engage in or perform experimentation or research affecting your care or treatment and the right to refuse to participate in this activity.
- Formulate advance directives and appoint a surrogate to make health care decisions on your behalf to the extent permitted by law. The provision of the patient's care shall not be conditioned on the existence of an advance directive. (Please see the center's policy on advanced directives)
- Confidential treatment of all communications and records pertaining to care. Written permission shall be obtained before medical records can be made available to anyone not directly concerned with your care. You may receive medical record on request for a reasonable fee established by the facility.
- Responsible responses to any reasonable request for service offered by the facility.
- Know the facility fees for services. Receive an explanation of a bill for service, regardless of source of payment along with the right to be informed of the payment methodology utilized.
- Know the identity, professional status, institutional affiliation and credentials of health care professionals providing their care, and be assured these individuals have been appropriately credentialed according to the policies of the center.
- Be informed of patient conduct and responsibilities rules.
- When it is medically incapable to give care information to a patient, the information is provided to a person designated by the patient or to a legally authorized person.
- Expect continuity of care including instructions and follow-ups for your condition.
- Be informed about procedures for expressing suggestions, complaints and grievances, concerning the quality of care provided to you and expect follow-up on your comments, including those required by state and federal regulations.

### **Patient Responsibilities:**

- Provide complete and accurate information to the best of your ability about your health, any medications, including over-the-counter products and dietary supplements and any allergies or sensitivities.
- Make it known whether you comprehend the course of medical treatment and what is expected of you.
- Follow the treatment plan prescribed by your provider.
- Keep appointments and notify surgery center or physician when unable to keep in advance.
- Provide a responsible adult to transport you home from the facility and remain with you for 24 hours, if required by your provider.
- Accept responsibility for your actions should you refuse treatment or not follow your physician's orders
- Accept personal financial responsibility any charges not covered by your insurance.
- Follow our facility's policies and procedures.
- Be respectful of all the health care providers and staff, as well as other patients.

If you have any questions or complaints against this facility, you should contact California Department of Public Health (CDPH), Licensing and Certification program (L&C), Orange County District Office, 681 S. Parker Street, Suite 200, Orange, CA 92868. District Manager: Jacqueline Lincer Phone: (714) 567-2906, Toll Free: (800) 228-5234, Fax: (714) 567-2815