

# RAIDER SURGICAL CENTER

## Patient Rights

As a patient, you have the right:

- To have access to the patient rights and responsibilities established by this Center.
- To see posted written notice of the patient rights in a place or places within the facility likely to be noticed by patients (or their representative, if applicable) waiting for treatment. The written poster will include name, address, and telephone number of a representative of the state agency to whom the patient can report complaints, as well as the website for the Office of the Medicare Beneficiary Ombudsman.
- To be treated with respect, consideration and dignity.
- To be respected for your cultural and personal values, beliefs and preferences.
- To effective communication. The Center communicates with the patient who has vision, speech, hearing, or cognitive impairments in a manner that fits the patient's need.
- To receive information in a manner tailored to the patient's age, language, and ability to understand. The Center provides interpreting and translation services.
- To be provided appropriate personal privacy. Patient disclosures and records are treated confidentially, and patients are given the opportunity to approve or refuse their release, except when release is required by law.
- To access, request amendment to, and obtain information on disclosures of his or her health information, in accordance with law and regulation.
- To receive care in a safe setting.
- To refuse participation in experimental research.
- To pain management.
- To be free from all forms of abuse or harassment.
- To be fully informed (Informed Consent) about a treatment or procedure and the expected outcome before the procedure is performed.

Patients are provided, to the degree known, complete information, concerning their diagnosis, evaluation, treatment, and prognosis. When it is medically inadvisable to give such information to a patient, the information is provided to a person designated by the patient or a legally authorized person.

The Center provides the patient or surrogate decision-maker with the information about the outcomes of care, treatment, or services that the patient needs in order to participate in current and future health care decisions.

The Center informs the patient or surrogate decision-maker about unanticipated outcomes of care, treatment.

- To have the opportunity to participate in decisions involving your healthcare, treatment, or services, except when such participation is contraindicated for medical reasons. The Center involves the patient's family in care, treatment, or services decisions, to the extent permitted by the patient or surrogate decision-maker, in accordance with law and regulation.
- To be informed of your right to change your provider if other qualified providers are available.
- To have appropriate information regarding the absence of malpractice insurance coverage.
- To truthful marketing and advertising regarding the competence and capabilities of the organization.
- To exercise your rights without being subject to coercion, discrimination, reprisal, or interruption of care that could adversely affect you.
- To information about procedures for expressing suggestions, complaints, and grievances, including those required by state and federal regulations.
- To receive in advance of the date of the procedure the Center's policies on advance directives, including a description of applicable state health and safety laws and if requested, official state advance directive information forms.
- To receive written information about your physician's possible ownership in the Surgery Center. Patients are informed about physician ownership prior to the procedure.
- To information regarding fee for services and payment policies.
- To information regarding the services available at the organization, provisions for after-hour emergency care, and the credentials of healthcare professionals.
- *If a patient is adjudged incompetent under applicable state health and safety laws by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed under state law to act on the patient's behalf.*
- *If a state court has not adjudged a patient incompetent, any legal representative designated by the patient, in accordance with the state law, may exercise the patient's rights to the extent allowed by state law.*

### **Advance Notice of Rights**

The patient has the right to receive verbal and written notice in advance of the date of the procedure, in a language and manner that the patient or the patient's representative understands. The Center gives brochures to each patient being admitted with the Center's written policies and the nurse making the preoperative call informs the patient verbally.

### **Patient Responsibilities**

As a patient, you have the responsibility

- To 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.
- To follow the treatment plan prescribed by your provider.
- To provide a responsible adult to transport you home from the facility and remain with you for 24 hours, if required by your provider.
- To inform your provider about any living will, medical power of attorney, or other directive that could affect your care.
- To accept personal financial responsibility for any charges not covered by your insurance.
- To be respectful of the health care providers and staff, as well as other patients.

### **Advance Directive: Statement of Limitation**

This facility does not provide implementation of advanced directives; on the basis of conscience (the scheduled procedure is an elective procedure), regardless of the contents of any advance directive or instructions from a health care surrogate or attorney. If an adverse event occurs at this facility, we will initiate resuscitative or other stabilizing measures and transfer patient to an acute care hospital for further evaluation. The receiving hospital will implement further treatment or withdrawal of treatment measures already begun in accordance with patient wishes, advance directive or health care power of attorney.

### **Disclosure of Ownership**

The Raider Surgical Center is a Limited Liability Corporation (LLC), which is owned by: Wade Graham, MD, Karl Bentley, MD and Joel George, MD

### **Grievance Policy**

The Center strives to provide high quality of care and achieve patient satisfaction. Patient grievances/complaints provide a means to measure achievement of this goal and to identify a need for performance improvement.

**Grievance/Complaint:** Grievances are defined as care that the ASC provided or allegedly failed to provide.

**Neglect –** Failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness (42 CFR 488.301).

**Abuse –** The willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish (42 CFR 488.301).

All complaints received by the Center personnel shall be forwarded to the clinical director or his/her designee immediately, at least the same day. The clinical director will respond in writing to the grievance within 3 days of receiving it.

For a full copy of the grievance procedure, please ask any Center personnel.

### **To report a grievance:**

Clinical Director: Leticia Graham, BSN, RN  
Phone: 956-429-4902

### **To Report a Concern:**

Office of Quality Monitoring	Texas Department Health Services
The Joint Commission	Manger, Health Facility Compliance
One Renaissance Blvd.	Group, PO Box 149347
Oakbrook Terrace, IL 60181	Austin, Texas 78714-9347
Fax: 630-792-5636	888-963-7111 or 888-973-0022

### **Information is also available via:**

Joint Commission  
E-Mail: [complaint@jointcommission.org](mailto:complaint@jointcommission.org)  
[http://www.jointcommission.org/report\\_a\\_complaint.aspx](http://www.jointcommission.org/report_a_complaint.aspx)

Office of the Medicare Beneficiary Ombudsman  
<http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>

### **RAIDER SURGICAL CENTER**

**1400 E Ridge Road, Ste 3**

**McAllen, TX 78503**

**956-429-4900**

### **ASC HOURS:**

**Monday – Friday**

**6:00 am – 4:00 pm**