

## Patient Rights & Responsibilities

We are pleased that you have selected our Clinic to provide your health care. Our goal is to provide safe and effective care that meets your health care goals. In order to meet this goal, we must work together. You have the right to expect certain considerations when you come to our Clinic for care.

These rights include your right to:

- Receive care regardless of race, religion, sex, gender preference, age, national origin, disease, or disability;
- Be informed and involved in all aspects of your care;
- Have your cultural, psychosocial, spiritual and personal values respected;
- Receive information in a language or form you can understand. This includes providing the services of an interpreter, when needed. You may also choose to have a friend or family member provide this service;
- Provide informed consent for care and treatment, including the risks and benefits of the proposed treatment and any potential complications;
- Have your family members and/or significant others participate in care decisions, to the extent you wish;
- Be involved in resolving conflicts about care decisions
- Refuse care or treatment and to know the potential consequences of your refusal;
- Receive information about formulating advance directives and resources for developing advance directives, such as a “Living Will” or other such documents;
- Be assured of the security and confidentiality of your medical information gathered during treatment, including your Clinic medical record and communications with the Clinic;
- Confidentiality of your clinical records. For further details on how we may use and disclose your medical information please refer to our “Notice of Privacy Practices”;
- Inspect and receive a copy of medical information that we maintain for you with some limited exceptions. For further details refer to our “Notice of Privacy Practices”;
- Receive information about and access to protective services;
- Know the name and title of those providing your care;
- Be assured of privacy and safety while receiving treatment in the Clinic;
- Appropriate assessment and management of pain;
- Access to the Clinic and reasonable accommodation of your disabilities in accordance with the Americans with Disabilities Act; and
- Know the charges for care, including any co-pays, and our policies for payment for services, including insurance, and to be informed in writing of any charges not covered by your insurance or other payor.

You also have the right to file a complaint about the care that is or fails to be provided without fear of reprisal or discrimination. We consider these important opportunities to improve our service and welcome this feedback.

You also have some responsibilities in assisting us to meet your health care goals. These include:

- Providing your practitioner with complete, accurate health history, including any allergies;
- Assisting your provider to best meet your health care needs by participating in your care by asking questions and expressing any concerns;
- Following your practitioner's instructions for care. This includes following instructions for taking your medicines, diet modifications, activity restrictions, and so forth;
- Notifying the Clinic at least 24-hours in advance if you need to cancel a scheduled appointment;
- Treating all providers and Clinic staff with courtesy and respect; and
- Promptly informing the Highline Medical Enterprises Patient Advocate of any concerns or complaints related to your care or Clinic experience.