



SPECIALIZING IN HIGH RISK OBSTETRICS AND GYNECOLOGIC LAPAROSCOPY
3000 SW 148 AVENUE, SUITE 114
MIRAMAR, FLORIDA 33027
T: 954.499.7944 * F: 954.538.0767

- Contact information, family members and caregivers and other needed information
- Let us know:
 - Any risks about your care
 - Changes in your care, illness, or injury
 - Safety concerns
 - Violation of your patient rights
 - If you understand your care plan and what we expect from you
 - If you don't understand your care plan or its information
 - If you have or need to ask questions
- Please:
 - Follow your care plan and instructions created by your doctor, nurses or other health care team members
 - Keep appointments and, if you cannot make your appointments, let us know at a minimum 24 hours before your appointment
 - Be responsible for your actions if you refuse care or don't follow doctor's orders
 - Pay your health care bills in a timely manner
 - Follow Practice procedures, rules and regulations
 - Be thoughtful of the rights of other patients and our staff
 - Be respectful of yourself and our staff
 - Help staff to assess your pain, to assist you to discuss and get prompt relief, communicate your concerns about pain medicines and develop a pain management plan
 - Treat the doctor and our health care staff with respect and consideration
 - Accept that bad language or behavior is not tolerated and may be grounds for dismissal
 - Accept we may end our relationship if you do not follow your doctor's orders or care plan



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- File a complaint with the Department of Health or others with your concerns about patient abuse, neglect, misuse of your property at the Practice, other unresolved complaints, patient safety, and quality concerns
- Have a fair review of alleged patient right violations
- Receive, as offered by state law:
 - care and treatment for mental illness or development disability
 - all legal and civil rights as a citizen
- Understand and expect emergency procedures without unneeded delay within Practice scope
- Get needed information to approve a treatment or procedure

Payment and Administrative Policy

Our **Payment and Administrative Policy** gives you the right to:

- Review your health care bill regardless of your ability to pay it or the payment source
- Receive information about available financial resources
- Know if the Practice, doctors and other team members accept Medicare, the government's health insurance for those aged 65+ or disabled
- Know and understand the Medicare charges for your services and treatment provided
- Receive if you ask, with explanation, a reasonable estimate of your health care charges before treatment
- To be free from any requirement to purchase drugs, or rent or purchase medical supplies or equipment from any particular source (specifically in accordance with the provisions of the CA Section 1320 of the Health and Safety Code) and also to receive patient choice in these type of decisions

Your Patient Responsibilities

You are an important and active member of your care plan. You have certain responsibilities to yourself and to your care team.

In the spirit of shared trust and respect, we ask you to:

- Give true and complete information about your:
 - Health status
 - Medical history
 - Hospitalizations
 - Medicines
 - Other matters about your health



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- Refuse experimental research including new drug and medical device investigations
- Receive the information necessary to approve a treatment or procedure
- Give consent to a procedure or treatment

Access to Services Policy

Our **Access to Services Policy** gives you the right to:

- Receive translator, interpreter or other necessary services or devices to help you communicate with the Practice in a timely manner
- Bring a service animal except where prohibited pursuant to Practice policy
- Have access to our facility buildings and grounds in compliance with The Americans with Disabilities Act, a law that stops discrimination against people with disabilities. The ADA policy is available upon request
- Prompt and reasonable response to questions and requests for service

Ethical Decision Policy

Our **Ethical Decision Policy** gives you the right to:

- Talk to and join in with your doctor about:
 - conflict resolutions
 - withholding resuscitative services
 - foregoing or withdrawing life sustaining care
 - investigational study or clinical trials
- Know that if your health care expert decides your refusal to accept treatment prevents you from getting the right care (as stated by its ethical and professional standards), it can end the relationship

Protective Service Policy

Our **Protective Service Policy** gives you the right to:

- Receive available protective and advocacy services
- Be given the Practice's policies and procedures for:
 - Initiation, review, resolution of patient complaints, including the address and phone number to file complaints
- Discuss complaints, issues, or problems with your doctor and the Practice management team



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- To wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with your treatment or diagnostic procedures

Health Status and Care Policy

Our **Health Status and Care Policy** gives you the right to:

- Be informed of your health status in terms and / or language that you, your family, and caregivers can be expected to understand
- Take part and be active in your care and treatment plan
- Participate in decisions in your care, unless your doctors or others believe it is harmful to you
- Know, be told, and understand:
 - the names and roles of your health care experts that provide your care
 - your follow-up care
 - risks, benefits and side effects of all medicines and treatment procedures for your diagnoses
 - innovative or experimental medicines and treatment procedures of diagnosis offered
 - alternative treatment options offered.
 - your procedure and to "give informed consent" before it begins
 - possible outcomes of your care and treatment
 - the assessment and management of your pain
- When and if the Practice recommends other health care institutions:
 - to participate in your care
 - to know who these other health care places are and what they will do
 - to refuse their care
- Get help from the doctor and others for follow-up care, if available
- To change providers or get a second opinion, including specialists at your request and expense

Decision Making and Notification Policy

Our **Decision Making and Notification Policy** gives you the right to:

- Choose a person to be your health care representative or decision-maker
- Exclude those you do not want help from or to join in your care or decisions
- Ask for, but not have the right to demand, services the Practice does not think are needed or appropriate
- Refuse treatment
- Be included in experimental research only with your written consent



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Patient Rights

Your Patient Rights

Welcome to our Practice. We respect our patients' dignity and pride. This document will explain your patient rights and responsibilities. It is part of your patient registration and is an important part of your health care plan. If you have any questions, please contact the Practice/Clinic leadership.

Our commitment to you, our patient, includes the following rights. We affirm that we will deliver high-quality health care to every patient without regard to: *age, gender, disability, race, color, ancestry, citizenship, religion, pregnancy, sexual orientation, gender identity or expression, national origin, health condition, marital status, veteran status, payment source or ability, or any other basis prohibited by federal, state, or local law.*

Considerate and Respectful Care

Our Considerate and Respectful Care Policy gives you the right to:

- Fair, high-quality, safe and professional care
- Care regardless of color, race, religion, creed, etc.
- Consideration, respect, and recognition of you and your individuality
- Treatment privacy
- Safe environment
- Ask for (except in emergencies) a person of the same sex to be available for any part of an exam, treatment or procedures performed by a person of the opposite sex
- Not be undressed any longer than needed for the exam, test, procedure, or other reason
- Private and discreet consultation, exam, and care. See Notice of Privacy Practices (NOPP) for the full list of privacy and security of health information/medical record rights