



Scottsdale Endoscopy Center

9787 N 91st Street Suite 103, Scottsdale, AZ 85258, P: 480-657-0889

PATIENT RIGHTS

- Receive access to equal medical treatment and accommodations regardless of race, creed, sex, national origin, religion or sources of payment for care.
- Be fully informed and have complete information, to the extent known by the physician, regarding diagnosis, treatment, procedure and prognosis, as well as the risks and side effects associated with treatment and procedure prior to the procedure.
- Exercise his or her rights without being subjected to discrimination or reprisal.
- Voice grievances regarding treatment or care that is (or fails to be) furnished.
- Personal privacy.
- Receive care in a safe setting.
- Be free from all forms of abuse or harassment.
- Receive the care necessary to regain or maintain his or her maximum state of health and if necessary, cope with death.
- Receive notice of their rights prior to the surgical procedure in verbal and written notice in a language and manner that ensures the patient, or the patient's representative, or *the patient's surrogate* understand *all of the patient's rights*.
- Expect personnel who care for the patient to be friendly, considerate, respectful and qualified through education and experience, as well as perform the services for which they are responsible with the highest quality of services.
- Be fully informed of the scope of services available at the facility, provisions for afterhours care and related fees for services rendered.
- Be a participant in decisions regarding the intensity and scope of treatment. If the patient is unable to participate in those decisions, the patient's rights shall be exercised by the patient's designated representative or patient's surrogate other legally designated person.
- Make informed decisions regarding his or her care.
- Refuse treatment to the extent permitted by law and be informed of the medical consequences of such refusal. The patient accepts responsibility for his or her actions including refusal of treatment or not following the instructions of the physician or facility.
- Approve or refuse the release of medical records to any individual outside the facility, or as required by law or third party payment contract.
- Be informed of any human experimentation or other research/educational projects affecting his or her care of treatment and can refuse participation in such experimentation or research without compromise to the patient's usual care.
- Be advised of the facilities grievance process, should he/she wish to communicate a concern regarding the quality of the care he/she receives or if he/she feels determined discharge date is premature. Notification of the grievance process includes: whom to contact to file a grievance, and that he/she will be provided with a written notice of the grievance determination that contains the name of the facilities contact person, the steps taken on his/her behalf to investigate the grievance, the results of the grievance and the grievance completion date.
- Access to and/or copies of his/her medical records.
- Be informed as to the facility's policy regarding advance directives/living wills.
- Be fully informed before any transfer to another facility or organization and ensure the receiving facility has accepted the patient transfer.
- Express those spiritual beliefs and cultural practices that do not harm or interfere with the planned course of medical therapy for the patient.
- Expect the facility to agree to comply with Federal Civil Rights Laws that assure it will provide interpretation for individuals who are not proficient in English.
- Have an assessment and regular assessment of pain.
- Education of patients and families, when appropriate, regarding their roles in managing pain.
- To change providers if other qualified providers are available.
- 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.



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- If a state court has not adjudged a patient incompetent, any legal representative designated by the patient in accordance with state laws may exercise the patient's rights to the extent allowed by state law.

PATIENT RESPONSIBILITIES

- Provide complete and accurate information to the best of his/her ability about his/her health, any medications, including over-the-counter products and dietary supplements, and any allergies or sensitivities.
- Follow the treatment plan prescribed by his/her provider and participate in his/her care.
- Provide a responsible adult to transport him/her home from the facility and remain with him/her for 24 hours, if required by his/her provider.
- Be considerate and behave respectfully toward all health care professionals and staff, as well as other patients.
- Respecting the property of others and the facility.
- Reporting whether he or she clearly understands the planned course of treatment and what is expected of him or her.
- Keeping appointments and, when unable to do so for any reason, notifying the facility and physician.
- Observing prescribed rules of the facility during his or her stay and treatment and, if instructions are not followed, forfeit of care at the facility.
- Promptly fulfilling his or her financial obligations to the facility and accepting financial responsibility for any charges not covered by his/her insurance.
- Identifying any patient safety concerns.

I have been informed of my Rights and Responsibilities as a patient of **Scottsdale Endoscopy Center**.

PATIENT COMPLAINT OR GRIEVANCE: report a complaint or grievance you can contact the facility Administrator by phone at 480-657-0889 or one of the following agencies:

Arizona Department of Health Service

Division of Licensing Services

Phone: (602) 364-3030

Fax: (602) 792-0466

<http://app.azdhs.gov/ls/>

[online-complaint/med-complaint.aspx](http://app.azdhs.gov/ls/online-complaint/med-complaint.aspx)

Accreditation Association for Ambulatory Health Care

5250 Old Orchard Road, Suite 200

Skokie, IL 60077

Phone: (847) 853-6060

Medicare Health Services Advisory Group

1-877-588-1123

Centers for Medicare and Medicaid Services

<http://medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>

PHYSICIAN OWNERSHIP:

I have been informed that my physician may have a direct interest in Scottsdale Endoscopy Center
The following physicians are owners:

Dr. Daniel Meline

Dr. John Yalam