

**VALLEY AMBULATORY SURGERY CENTER
ST. CHARLES, ILLINOIS
STATEMENT ON PATIENT RIGHTS AND RESPONSIBILITIES**

In recognition of the responsibility of this Center in the rendering of patient care and our commitment to high standards of quality professional care, these rights and responsibilities are affirmed as the policies and practices of Valley Ambulatory Surgery Center.

As a patient in this Ambulatory Surgery Center, you have:

1. The right to receive care in a safe setting.
2. The right to courtesy, respect, consideration, privacy, dignity, responsiveness and timely attention to your medical and personal care needs. We adhere to the principle that patients come first.
3. The right to be fully informed about a treatment or procedure and the expected outcome before it is performed.
4. The right to be provided, to the degree known, complete information concerning your diagnosis, evaluation, treatment and prognosis. When it is medically inadvisable to give such information to you, the information is provided to a person designated by you or to a legally authorized person.
5. The right to receive information about your stay and care. You have the right to inspect or to obtain copies of your medical records. You or your representative may inspect and copy all of your clinical and other records concerning your care and maintenance kept by this Center or by your physician.
6. The right to have your questions answered, to receive second independent opinions and to be advised of potential conflicts of interest that your physicians might have. Patients are entitled to know the benefits, risks and financial costs of the treatment alternatives that are appropriate for your condition. You should receive guidance from your physician as to the optimal course of action.
7. The right and opportunity to participate in decisions regarding your medical treatment and overall health care, except when such participation is contraindicated for medical reasons. Health care decisions should be a shared process between patients, their families and health care professionals. Patients are free to accept or refuse health care that is recommended by your physician(s) and to know the consequences of such action.
8. The right to change your provider if other qualified providers are available.
9. The right to have discussions, consultations, examinations and treatment conducted discreetly and held in confidence. The right to be provided appropriate privacy. Persons not directly involved in your care must have your permission to be present during such services.
10. The patient has the right to confidentiality. The physician and this facility should not reveal confidential communications or information pertaining to patient care and/or medical records without the express consent of the patient, unless authorized to do so by law. The patient has the right to refuse the release of health information in accordance with law.
11. The right to take an active role in your care and treatment and the right to exercise your rights without being subjected to discrimination or reprisal.
12. The right to continuity of health care.
13. The right to be advised if the Center proposes to engage in or perform experimental research affecting your care or treatment. You also have the right to refuse to participate in any such research projects.
14. The right to be informed about fees for services, payment policies and to examine and receive an explanation of your bill regardless of the source of payment.
15. The right to treatment without regard to race, color, national origin, sex, handicap disability or age and to be free from all forms of abuse or harassment.
16. The right not to be deprived of any rights, benefits or privileges guaranteed by law based solely on your status as a patient in this Center.
17. The right to unimpeded, private and uncensored communication of your choice by mail and by telephone. We shall ensure that your correspondence is promptly received and mailed and that you have reasonable access to a telephone.
18. The right to have your representative notified should you suffer from a surgical complication, an illness or an accident.
19. The right to designate advance directives such as a Living Will or a Durable Healthcare Power of Attorney that would authorize your designated agent to make health care decisions for you when you might be unable to do so. Advanced cardiac life support will be instituted in every instance, and the patient will be transported to a higher level of care.
20. As a patient in this facility you can expect information about pain and pain relief measures. You can expect your reports of pain to be believed, to have a concerned staff committed to pain prevention and management; health professionals who respond quickly to reports of pain and effective pain management.
21. VASC provides information regarding these rights and responsibilities to our patients through:
 - a) Posting the "Statement on a Patient Bill of Rights",
 - b) Outlining services available at VASC through brochures,
 - c) Posting the Illinois Department of Public Health "Statement on Patient Grievances",
 - d) Making available charge and payment policies.
 - e) Providing for after-hour and emergency care as outlined on patient discharge instruction sheets and the telephone answering machine.
 - f) HIPAA Privacy Notice.

STATEMENT ON PATIENT RIGHTS AND RESPONSIBILITIES (Continued)

22. The right to access, review, request amendments to and/or object to information contained in the patient's medical record.
23. The right to express grievances and complaints or make suggestions regarding the care and services provided or has failed to be provided..
24. The right to know that your physician may have a minority (<3%) ownership interest in this Center. If you require further information regarding this, please contact your surgeon.
25. The right that if you are adjudged incompetent under applicable State Health and safety laws by a court of proper jurisdiction, your rights can be exercised by the person appointed under State law to act on your behalf.
26. The right to designate any legal representative to exercise your rights to the extent allowed by State law.
27. The right to exercise your rights with out being subject to discrimination or reprisal.

PATIENT RESPONSIBILITIES

1. The patient has the responsibility to provide complete and accurate information to the best of his/her health and medications including over the counter products and dietary supplements and allergies or sensitivities. The patient has an obligation not to withhold information that may be required in order to make correct diagnostic and treatment decisions.
2. The patient has a responsibility to be an active participant in your care and develop a physician/ patient relationship based on trust, understanding and cooperation and to be respectful of all the health care providers and staff, as well as other patients.
3. The patient has a responsibility to ask questions, understand treatment options and participate in care plans; follow these plans and consider potential consequences from refusal of care or non-compliance with care plans and recommendations.
4. The patient has a responsibility to keep scheduled appointments and to 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.
5. The patient has a responsibility to meet their financial obligations associated with care at this Center.
6. As a patient in this facility, we expect that you will ask your doctor or nurse what to expect regarding pain and pain management; discuss pain relief options with your providers and nurses; work with your provider and nurses to develop a pain management plan; ask for pain relief when pain first begins; help your provider and nurse assess your pain; tell your provider and nurse if your pain is not relieved; and tell your provider or nurse about any concerns you have about taking pain medication.
7. Patient has the responsibility to inform his/her provider about living will, Medical Power of Attorney or other directive that could affect his/ her care. The patient is responsible for providing VASC with a copy of any advanced directive. Advanced cardiac life support will be instituted in every instance and the patient will be transported to a higher level of care.
8. The patient has a responsibility to inform the Center of any problems associated with care and to express opinions, concerns and complaints in a constructive manner to appropriate individuals at this Center. To report a grievance, complaint or provide suggestions you can contact:

Valley Ambulatory Surgery Center

Deborah Lee Crook, R.N.,CASC
Administrator
2210Dean Street
St Charles, Il, 60175
dlcrook@symbion.com
630.584.9800

Illinois Department of Public Health

535 W. Jefferson St.
Springfield, IL, 62761
<http://www.idph.state.il.us>
217-782-4977

Symbion, Inc.

Corporate Compliance Officer
40 Burton Hills Boulevard, Suite 500
Nashville, Tennessee, 37215
Hotline 1-800-279-4655

Office of Medicare Beneficiary Ombudsman

www.cms.hhs.gov/center/ombudsman

Approved at the 11/97 Board of Directors meeting.
Revised and Approved at the 3/00, 12/00, 2/03, 7/13/2010 Board of Directors meetings
Ref: IDPH Rules 210.1800 (4) (E), 210.2100
AAHC Standard 1.F (Rights of Patients) - Joint Commission (R1.1.2.7)
HIPAA (45 CFR 164.510)F) HIPAA Privacy Notice