



KOHALA COAST URGENT CARE

62-100 KAUNAOA DRIVE, KAMUELA, HI 96743

PH: (808) 880-3221 FAX: (434) 302-9654

PATIENT RIGHTS

1. Receive care regardless of race, religion, national origin, disability, sex, sexual orientation, age or source of payment for care.
2. Be seen in a private and secure area during treatment.
3. Know the name and specialty of the physician and staff.
4. The right to be referred to other services available upon request.
5. Be actively involved in the decisions regarding your care.
6. Refuse treatment to the extent permitted by law and be informed of the potential consequences of that refusal.
7. Refuse to participate in educational, research, or experimental treatment.
8. Be informed of your condition and the treatment(s) recommended, including information about the potential benefits, risks and alternative treatments regarding any surgery or other intrusive treatment.
9. Refuse to sign consent until you understand what you are signing.
10. Designate a family member or representative of your choice to make informed decisions about your care if you so choose.
11. Formulate advance directives and have them followed, as appropriate.
12. Protection of the confidentiality of your medical records and communications to the extent provided by law.
13. Inspect your medical records and ask for a copy of your medical records within the limits of the law (copying fees may be applicable).
14. Obtain explanations of balance due and receive an itemized bill.
15. Express concerns or grievances regarding your care or treatment.

PATIENT RESPONSIBILITIES

1. Treat all other persons (patients, family members, vendors, staff members) at Kohala Coast Urgent Care LLC with courtesy, dignity and respect at all times.
2. Respect the rights and property of Kohala Coast Urgent Care, LLC, its staff, vendors and other patients.
3. Take an active part in developing the treatment plan for your care and cooperate with the treatment you and your provider have agreed upon.
4. Report any changes in your condition or symptoms to Kohala Coast Urgent Care, LLC.
5. Notify any member of the healthcare team, if you do not understand.
6. Provide information about your care and treatment, or about any information you are provided or any papers you are requested to complete.
7. Be on time for scheduled appointments and cancel appointments at least 2 hours before the scheduled appointment.
8. Provide accurate and complete registration and health history information
9. Promptly pay any financial obligations.
10. Keep your personal belongings in a safe place and do not bring valuables. Lost or stolen personal items are not the responsibility of Kohala Coast Urgent Care, LLC.
11. Promptly inform a member of your health team or the clinical manager of any concerns you may have regarding your care.