

# Center for Advanced Eye Surgery

3920 Bee Ridge Road; Building F, Suite C; Sarasota, Florida 34233

Phone: 941-925-0000 • Fax: 941-927-2726

## Patient's Rights and Notification of Physician Ownership

Each patient has the right to be treated as an individual and to actively participate in his/her care. At Center for Advanced Eye Surgery (CFAES), the medical staff have adopted the following patient rights and responsibilities, which are communicated to each patient, patient's representative or surrogate prior to any procedure or surgery.

### Patient Rights

- Each patient has the right to receive treatment without discrimination as to age, race, color, religion, sex, national origin, disability, culture, economic status or source of payment.
- To receive considerate, respectful, and dignified care, provided in a safe environment, free from any form of abuse, neglect, harassment or reprisal.
- To know the identity and professional status of individuals providing services to them, and to know the name of the physician who is primarily responsible for coordination of his/her care.
- To receive information in a manner that the patient understands. Our staff's goal is to communicate with patients in lay man's terms.
- To receive sufficient information from his/her physician about his/her illness, course of treatment and expected recovery.
- To receive as much information about any proposed treatment or procedures as he/she may need in order to give informed consent prior to the start of any procedure or treatment.
- To be provided with privacy and security of self and your personal belongings throughout the duration of your procedure and admission at the Surgery Center.
- When it is medically inadvisable to give confidential information to a patient, such information will be provided to a person designated by the patient, or to a legally authorized person.
- To make decisions regarding their treatment plan that is recommended by the physician. Accordingly, the patient may accept or refuse any recommended medical treatment. If treatment is refused, the patient has the right to be told what effect this may have on their health, and the reason shall be reported to the physician and documented in the medical record.
- To be given full consideration of privacy concerning his/her medical care program. Case discussion, consultation, examination and treatment are confidential and shall be conducted discretely.
- Confidential treatment of all communications and records pertaining to his/her care and his/her stay while at the facility. His/her written permission shall be obtained before his/her medical records can be made available to anyone not directly concerned with his/her care.
- The facility has established policies to govern access and duplication of patient records.
- To leave the facility even against the advice of his/her physician.
- Reasonable continuity of care, including SBAR hand-off reporting amongst staff members and to know in advance the time and location of appointment, as well as the physician providing the care.
- Be informed by his/her physician or a delegate of his/her physician of the continuing health care requirements following his/her discharge from the facility.
- To know which facility rules and policies apply to his/her conduct while a patient.
- To have all patients' rights apply to the person who may have legal responsibility to make decisions regarding medical care on behalf of the patient. All personnel shall observe these patient's rights.
- To be informed of any research, experimental treatment or drugs and to have the right to refuse participation without compromise to the patient's usual care. The patient's written consent for participation in research shall be obtained and retained in his/ her patient record.
- To examine and receive an explanation of his/her bill regardless of source of payment.
- To appropriate assessment and management of pain.
- Pediatric patients will be provided supportive and nurturing care that meets the emotional and physiological needs of the child and for participation of the caregiver in decisions affecting medical treatment and care.
- The patient has the right to obtain information regarding relationships between the organization and other healthcare and educational institutions, in so far as care is concerned. The patient also has the right to obtain information as to the existence of any professional relationships among individuals involved in his care.
- To know whether or not the organization accepts his insurance, including Medicare, prior to his treatment.
- Patients are informed of the patient's right to change providers if other qualified providers are available.
- To make suggestions regarding changes in policies and procedures of the organization and to file a grievance without fear of retaliation.
- To review, inspect and amend his/her health record to include disclosures.

### Patient Responsibilities

- The patient is responsible to provide accurate and complete information regarding present medical complaints, past illnesses, hospitalizations, medications, allergies and sensitivities and other matters relating to his/her health. The patient and/or their authorized representatives are responsible for asking questions when they do not understand what they have been told about the patient's care, medical diagnosis or treatment plan.
- To follow the treatment plan established by his/her physician.
- To keep appointments and to notify the physician or facility when unable to do so.
- The patient and/or patient representative is responsible for disposition of patient valuables.
- The patient is responsible for arranging transportation home from the facility and to have someone remain with him/her for a period of time designated by his/her physician.
- In the case of pediatric patients, a parent or guardian is responsible to remain in the facility for the duration of the patient's stay while being treated at the facility. The parent or legal guardian is responsible for participating in decision making regarding the patient's care.
- The patient is responsible for his/her actions and outcomes should he/she refuse treatment or not follow the physician's orders.
- The patient is responsible for being considerate of the rights of other patients, visitors, and facility personnel.

## **Language Interpretation**

Patients in need of an interpreter, whether visual or auditory are asked to notify the Center and one will be provided for you. If you have someone available to translate confidential, medical and financial information, please arrange to have them accompany you on the day of your procedure.

## **Advance Directives**

Patients have the right to information regarding Advance Directives and the facility's policy on Advance Directives. Applicable state forms will be provided upon request. The Center does not honor Do Not Resuscitate order due to conscience and moral beliefs. The Surgery Center is not an Acute Care Facility; therefore, regardless of the contents of any Advanced Directives or instructions from a Health Care Surrogate, should an adverse event occurs during treatment, the patient will be stabilized and transferred to a hospital where the decision to continue or terminate emergency measures can be made by an Emergency Medical Physician and next of kin or an authorized representative. If the Center is provided with the patient's Advanced Directives, a copy will accompany the patient upon transfer to the receiving facility. Should the patient or the patient's representative be adamant the Advance Directives to be honored, the patient will be offered care at another facility that can honor their wishes.

## **Physician Financial Interest and Ownership**

The Center is owned, in part, by one or more physician(s). The physician(s) who referred you to this Center, and/ or the physician who will be performing you procedure(s) may have a financial and ownership interest. Patients have the right to be treated at another health care facility of their choice. We are making this disclosure in accordance with federal regulations. The following Physician(s) have a financial interest in this Center: Joseph Ross, MD, FACS.

## **Complaints/Grievances**

Patients are encouraged to voice their concerns and to promptly notify the Center's staff should they have a complaint or grievance. The goal of CFAES is to provide our patients with an extraordinary experience and to provide safe and unbiased care and services. Patient experience feedback is valued and appreciated. In the event a complaint or grievance cannot be resolved immediately, unsettled concerns will be communicated to Administration for further evaluation and follow-up. Patients have the right to having their verbal or written grievances investigated and to receive written notification of any actions taken. In addition, surgery patients can also contact the following entities to report grievances or complaints.

Center for Advanced Eye Surgery: 3920 Bee Ridge Road Building F, Suite C, Sarasota, Florida 34233

- Janice Wade, CEO / Telephone: 941-925-0000

Florida Agency for Health Care Administration: 2727 Mahan Drive, Mail Stop #31, Tallahassee, FL 32308

- Jack Plagge, Manager of Hospital and Outpatient Services Unit /Telephone: 800-412-4549

Centers for Medicare & Medicaid Services: 7500 Security Boulevard, Baltimore, MD 21244

- 1-800-MEDICARE (1-800-633-4227)

CFAES is accredited by the Accreditation Association for Ambulatory Healthcare (AAAHC) 5250 Old Orchard Road, Suite 200; Skokie, IL 60077 / Telephone: 847-582-6060