

West River Endoscopy	EFFECTIVE DATE: 3/1/2020	REVISION DATE:
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CHAPTER 01: PATIENT RIGHTS		
SECTION: NOTICE TO PATIENTS		
TITLE: PATIENT RIGHTS		
<p>The rights of patient(s) include, but are not limited to:</p> <ol style="list-style-type: none"> 1) Exercise these rights without regard to sex or cultural, economic, educational, or religious background or the source of payment for their care. 2) Considerate and respectful care. 3) Knowledge of the name of the physician who has primary responsibility for coordinating their care and the names and professional relationships of other physicians who will see them. 4) Receive information from their physician about their illness, course of treatment, and prospects for recovery in terms that they can understand. 5) Receive as much information about any proposed treatment or procedure as they may need in order to give informed consent or to refuse this course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved in each and to know the name of the person who will carry out the procedure or treatment. 6) Participate actively in decisions regarding their medical care. To the extent permitted by law, this includes the right to refuse treatment. 7) Full consideration of privacy concerning their medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. The patient has the right to be advised as to the reason for the presence of any individual. 8) Confidential treatment of all communications and records pertaining to their care and stay at the center. Their written permission shall be obtained before their medical records can be made available to anyone not directly concerned with their care. 9) Reasonable responses to any reasonable requests they may make for service. 10) Leave the center even against the advice of their physicians. 11) Reasonable continuity of care and to know in advance the time and location of appointment as well as the physician providing the care. 12) Be advised if center/personal physician proposed to engage in or perform human experimentation affecting their care or treatment. The patient has the right to refuse to participate in such research projects. 13) Be informed by their physician or a delegate of their physician of their continuing health care requirements following their discharge from the center. 14) Examine and receive an explanation of their bill regardless of source of payment. 15) Know which center rules and policies apply to their conduct as a patient. 16) Have all patients' rights apply to the person who may have legal responsibility to make decisions regarding medical care on behalf of the patient. 17) Designate visitors of their choosing. If the patient has decision-making capacity, whether or not the visitor is related by blood or marriage, unless; <ol style="list-style-type: none"> (A) No visitors are allowed; (B) The facility reasonably determines that the presence of a particular visitor to the health or safety of a patient, a member of the health facility staff, or other visitor to the health facility, or would significantly disrupt the operations of the facility; (C) The patient has indicated to the health facility staff that they no longer wants this person to visit. 18) Have the patient's wishes considered for purposes of determining who may visit if the patient lacks decision-making capacity and to have the method of that consideration disclosed in the center policy on visitation. At a minimum, the center shall include any person living in the household. 19) This section may not be construed to prohibit a health facility from otherwise establishing reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors. 20) The right to be informed that Neil Greenspan, MD, David Schreiber, MD, Alyn Adrain, MD, Samir Shah, MD, Jeremy Spector, MD, Brett Kalmowitz, MD, Valley Dreisbach, MD, Tian Gao, MD and Daniel Greenwald, MD have an ownership interest in this center. 		

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<p>Complaints may be addressed to the Administrator at 401-274-4800 or to:</p> <p>Department of Health 3 Capitol Hill Providence, RI 02908 Phone: 401-222-5960</p> <p>Accreditation Association for Ambulatory Health Care, Inc. 5250 Orchard Road, Suite 200 Skokie, Illinois 60077 (847) 853-6060</p> <p>Office of Medicare Beneficiary Ombudsman www.medicare.gov/Ombudsman/activities.asp 1-800-MEDICARE</p>		