MASON CITY SURGERY CENTER

PATIENT'S RIGHTS AND RESPONSIBILITIES

MCSC is required to provide prospective patients, or the patient's authorized representative, with written and verbal notice of their rights and responsibilities prior to their procedure. The entire Patient Bill of Rights policy is available upon request. MCSC presents this information with the expectation that observance of these rights will contribute to a higher level of patient care and greater satisfaction for the patient and the patient's healthcare providers.

PATIENT RIGHTS TO:

- Considerate and respectful care in a safe setting that provides appropriate privacy.
- Voice grievances without being subjected to discrimination or reprisal.
- The degree known, receive complete and current information concerning your diagnosis, treatment and prognosis. The patient will be informed of the physician by name that is responsible for coordinating their care.
- Receive information necessary from your physician and the Surgery Center to give informed consent prior to the start of any procedure.
- Be involved in care planning and treatment. The patient will be informed of the Surgery Center's policy regarding advance directives prior to your procedure.
- Request or refuse treatment and to be informed of the medical consequences of your request.
- Have the opportunity to grant or deny permission for presence of individuals not directly involved in your care. Patient information and records will be treated confidentially and will only be disclosed with proper authorization except when required by law.
- Change physicians if another qualified physician is available. Physician credentials will be made available upon request.
- A reasonable response (within capacity) by the Surgery Center to the request for patient services. Upon the necessity to transfer to another facility, the patient will receive a full explanation of the need for the transfer.
- Obtain information concerning relationships of the Surgery Center to other healthcare or teaching institutions and regarding physician financial interest or ownership.
- Expect reasonable continuity of care and provision for care after discharge.
- Receive an explanation of the Surgery Center bill regardless of source of payment.

PATIENT RESPONSIBILITIES TO:

- The best of the patient's ability, provide prior and current health information including medical and surgical history, allergies or sensitivities, and home medications to those caring for you.
- Follow the treatment plan prescribed and inform providers of anticipated problems following the home care instructions.
- **Provide a responsible adult for transport upon discharge remaining with the patient for twenty-four (24) hours following discharge.**
- Report complications to your healthcare provider after discharge.
- Inform the physician and Surgery Center of an executed advance directive.
- Accept financial responsibility for charges not covered by insurance.
- Be respectful of all health care providers and staff, as well as other patients and visitors.
- Follow Surgery Center posted signs and rules.