



## Patient Bill of Rights

### POLICY:

Schulze Eye & Surgery Center and its staff have adopted the following statement of patient rights. The list includes, but is not limited to, the patient's rights as stated in this policy.

1. The patient has the right to considerate and respectful care.
2. The patient has the right to obtain from his/her physician complete current information concerning his/her diagnosis, treatment, and prognosis in terms the patient can reasonably be expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person on his/her behalf.
3. The patient has the right to receive from his/her physician information necessary to give informed consent prior to the start of any procedures and/or treatment. Except in emergencies, such information for informed consent should include, but not necessarily be limited to, the specific procedures and/or treatment, the medically significant alternatives for care or treatment exist, or when the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.
4. The patient has the right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of his/her action.
5. The patient has the right to every consideration of his/her privacy concerning his/her own medical care program. Case discussion, consultation, examination, and treatment are confidential, and should be conducted discreetly. Those not directly involved in his/her care must have the permission of the patient to be present.
6. The patient has the right to expect that all communication and records pertaining to his/her care should be treated as confidential.
7. The patient has the right to expect that within its capacity, Schulze Eye & Surgery Center must make reasonable response to the request of a patient for services. Schulze Eye & Surgery Center must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible, a patient may be transferred to another facility only after he has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for his/her transfer.
8. The patient has the right to obtain information as to any relationship of Schulze Eye & Surgery Center to other health care and education institutions insofar as his/her care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals.
9. The patient has the right to be advised if Schulze Eye & Surgery Center proposes to engage in or perform human experimentation affecting his/her care or treatment. The patient has the right to refuse to participate in such research projects.
10. The patient has the right to expect reasonable continuity of care. He/she has the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect that Schulze Eye & Surgery Center will provide a mechanism whereby he/she is informed by his/her physician or a delegate of the physician, of the patient's continuing health care requirements following discharge.
11. The patient has the right to examine and receive an explanation of his/her bill regardless of source of payment.
12. The patient has the right to know what Schulze Eye & Surgery Center rules and regulations apply to his conduct as a patient.

### Patient's Responsibilities:

1. Patient shall provide, to the best of his/her knowledge, accurate and complete information about his/her present health status and past medical history and shall report any unexpected changes to the appropriate practitioner.
2. The patient is responsible for following the treatment plan recommended by the primary physician involved in his/her case.
3. The patient shall be responsible for indicating whether he/she clearly understands a contemplated course of action and what is expected of him/her.
4. The patient is responsible for his/her actions if he/she refuses treatment, leaves the facility against the advice of the practitioner, and/or does not follow the practitioner's instructions relating to his/her care.
5. The patient is responsible for assuring that the financial obligations of his/her health care are fulfilled as expediently as possible.

### Patient's Rights To Complain:

1. The patient has a right to register a complaint against Schulze Eye & Surgery Center, in writing, or by calling: (912) 352-3120
2. If the complaint is not resolved to the patient's satisfaction he/she has a right to file a grievance with the State Board of Medical Examiners concerning the physician, staff, and or the treatment received while a patient of Schulze Eye & Surgery Center.
3. The patient should provide the physician or the Director of Surgical Services the specific nature of the complaint and the name and address of the person making the complaint.
4. If the grievance is not resolved to the patient's satisfaction, the patient should call or send a written complaint to either or both of the following agencies:

Composite State Board of  
2 Peachtree Street, N.W. 10<sup>th</sup> floor  
Atlanta, GA 30303-3465  
Telephone: 404-656-3913  
<http://medicalboard.georgia.gov>

-or-

Department of Human Resources  
2 Peachtree Street, NW, Suite 33.250  
Atlanta, GA 30303-3142  
Telephone: 404-657-7346  
<http://ors.dhr.georgia.gov/protal/site/DHR-ORS/>

The Law requires the board to respond in writing to all complaints within 60 days.

All patients will receive a copy of the Patient Rights and Responsibilities in their scheduling packets or it will be read to them.

All Medicare beneficiaries may also file a complaint with the Medicare Beneficiary Ombudsman. Visit the Ombudsman's webpage at:

[www.cms.hhs.gov/center/ombudsman.asp](http://www.cms.hhs.gov/center/ombudsman.asp)

Patient Initials / Date / Time: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_