

## PATIENT RIGHTS AND RESPONSIBILITIES

**As a patient of the Lutherville SurgiCenter, you have the following rights:**

1. To be accorded dignity as an individual and to receive equitable and humane treatment.
2. Receive care based upon medical needs without regard to age, race, creed, national origin, sexual orientation, physical challenge or source of payment.
3. To privacy to the extent consistent with adequate medical care. Case discussion, examination and treatment are confidential and will be conducted discreetly.
4. To have all records and communications pertaining to your care treated as confidential and private.
5. To know the name and function of any person rendering care and the name of the physician responsible for your care.
6. To refuse to participate as a teaching subject or to give data for research purposes. Experimental care or treatment will only be performed only with your consent and knowledge.
7. To receive information necessary to give informed consent, to know what is to be performed, by whom, why, other options available and the risks involved.
8. To receive information concerning diagnosis, treatment and prognosis in terms you can reasonably be expected to understand. If it is not medically advisable or feasible, to give information to you, the information will be made available to the individual designated by you to receive such information.
9. To refuse treatment to the extent permitted by law and to be informed of the medical consequences of your refusal.
10. To be fully informed of the fees involved with your care and to receive a full explanation of the services covered by the fee. You may request for your examination an itemized bill for your treatment.
11. To know that the SurgiCenter does not honor Advance Directives for surgery performed at the Center and that this information is necessary if, for any reason, you must be transferred to a hospital for further care.
12. To express grievances, without recrimination, to have concerns regarding your care reviewed and when possible, resolved. You may direct those inquiries to:

Lutherville SurgiCenter, c/o Administrator, 1400 Front Ave, Suite 100A, Lutherville, MD 21093;  
410-828-1525; [www.chesapeakehand.com](http://www.chesapeakehand.com)

Medicare Beneficiary Ombudsman: <https://www.cms.gov/Center/Special-Topic/Ombudsman/Medicare-Beneficiary-Ombudsman-Home.html>

Office of Health Care Quality, 7120 Samuel Morse Drive 2<sup>nd</sup> floor, Columbia MD 21046

1-800-492-6005 [dhmh.maryland.gov/ohcq](http://dhmh.maryland.gov/ohcq)

**As a patient of the Lutherville SurgiCenter, you have the following responsibilities:**

1. To provide complete and accurate information to the best of your ability about your health, medications, including over the-counter products and dietary supplements and any allergy or sensitivities you may have.
2. To follow the treatment plan prescribed by your surgeon.
3. To inform your surgeon of any living will, advance directive, medical power of attorney or other directive that could affect your care and to provide a copy to the SurgiCenter upon admission. Information on Advance Directives is included in the pre op packet.
4. To understand your insurance plan and accept personal financial responsibility for any charges NOT covered by the plan.
5. To be respectful of all health care providers and staff assisting in your care, as well as other patients present during your stay.
6. To read and follow all of the forms and information given to you before your surgery.

**Approval Date: 2/99**

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