



PHYSICIANS
Surgical Center

In accordance with the regulations of the Centers for Medicare and Medicaid (CMS), all patients shall receive the attached documents prior to the day of surgery. If you have any questions you may call the Physicians Surgical Center at 717-272-0007.

**You will find the following attachments:
Statement of Patient Rights and Responsibilities
Contact Information
Grievance Policy
Patient Responsibilities
Advance Directives**

On behalf of the entire "Care Team", thank you for choosing the Physicians Surgical Center. We appreciate your business and look forward to "Exceeding your Expectations!"

STATEMENTS OF PATIENT RIGHTS AND RESPONSIBILITIES

In order to provide a better understanding of the rights and responsibilities that exist between you, the patient and the PHYSICIANS SURGICAL CENTER, and to encourage a meaningful participation by you in your healthcare, we encourage you to be aware of your rights and responsibilities.

In accordance with the PA State Department of Health Laws:

THE PATIENT HAS A RIGHT TO:

1. Respectful care given by competent personnel free from harassment and abuse with protection and respect of patients' personal property.
2. Upon request, be given the name of his attending practitioner, the names of all other practitioners directly participating in his care and the names and functions of other health care persons having direct contact with the patient.
3. Consideration of privacy concerning his own medical care program. Case discussion, consultation, examination and treatment are considered confidential and shall be conducted discreetly.
4. Have records pertaining to his medical care treated as confidential except as otherwise provided by law or third party contractual arrangements.
5. Know what ASF rules and regulations apply to his conduct as a patient.
6. Expect emergency procedures to be implemented without unnecessary delay.
7. Good quality care and high professional standards that are continually maintained and reviewed.
8. Full information in layman's terms, concerning diagnosis, treatment and prognosis, including information about alternative treatments and possible complications. When it is not medically advisable to give the information to the patient, the information shall be given on his behalf to the responsible person.
9. Except for emergencies, the practitioner shall obtain the necessary informed consent prior to the start of a procedure. Informed consent is defined in section 103 of the Health Care Services Malpractice Act (40 P.S.1301.103).
10. Or if the patient is unable to give informed consent, a responsible person, has the right to be advised when a practitioner is considering the patient as a part of a medical care research program or donor program, and the patient, or responsible person, shall give informed consent prior to actual participation in the program. A patient or responsible person may refuse to continue in a program to which he has previously given informed consent.
11. Refuse drugs or procedures, to the extent permitted by statute, and a practitioner shall inform the patient of the medical consequences of the patient's refusal of drugs or procedures.
12. Medical and nursing services without discrimination based upon age, race, color, religion, sex, national origin, handicap, disability or source of payment.
13. If they do not speak English they shall have access, where possible, to an interpreter.
14. Have the ASF provide the patient, or patient designee, upon request, access to the information contained in his medical records, unless access is specifically restricted by the attending practitioner for medical reasons.
15. Expect good management techniques to be implemented within the ASF. These techniques shall make effective use of the time of the patient and avoid the personal discomfort of the patient.
16. That when an emergency occurs and a patient is transferred to another facility, the responsible person shall be notified. The institution to which the patient is to be transferred shall be notified prior to the patient's transfer.
17. Examine and receive a detailed explanation of his bill.
18. Expect that the ASF will provide information for continuing health care requirements following discharge and the means for meeting them.
19. Be informed of his rights at the time of admission, including the opportunity to learn about advance directives.

In accordance with Centers for Medicare and Medicaid Services Laws:

THE PATIENT HAS A RIGHT TO:

1. Be informed about their rights as a patient, prior to the day of surgery, in a language and manner that the patient or their representative can understand.
2. Know that they may contact the following agencies with any formal complaints:
 - A. Physicians Surgical Center Administrator
1840 Quentin Road, Lebanon, PA 17042
717-272-0007
Email: mmonk2@surgerypartners.com
 - B. Division of Acute and Ambulatory Care
Health and Welfare Building
625 Forster Street, Room 532, Harrisburg, PA 17120-0701
800-254-2164
www.portal.state.pa.us
 - C. Centers for Medicare and Medicaid Services, Ombudsman
7500 Security Boulevard, Baltimore, MD 21244-1850
800-633-4227
www.cms.hhs.gov/center/ombudsman.asp
3. Chose the facility where they receive health care. The management partner and local physicians appreciate that you have selected the Physicians Surgical Center. It is your right to know that the center is owned and operated by Surgery Partners and local physicians as follows: Dr. Howard Melnick, Dr. Glen Mesaros, Dr. John Moffitt, Dr. Barbara Klatchko, Dr. Vincent Avallone, Dr. Raymond DeMaio, Dr. James Bush, Dr. Madhukar Patel, Dr. Leonard Ferrara, Dr. Donald Diverio and Dr. Daniel Lorenzo.
4. Receive information on Advance Directives in advance of their procedure. As required by PA Law and COBRA Patient Self-Determination Act of 1990, information is made available to our patients concerning their rights to execute directives. Information is provided concerning the following advance directives: Living Wills, Health Care Proxy, and Durable Power of Attorney. Patients should also know the policy of the center is that all patients be treated equally in the provision of medical care without regard as to whether or not the patient has executed an advance directive. It is our intent to sustain life with extraordinary efforts should the need arise. Although basic Advance Directive information is available to patients, it is recommended that patients consult with their family attorney, physician or other advisors prior to making any decisions related to Advance Directives.
5. To make informed decisions regarding patient care. If a patient is adjudged incompetent by the appropriate court, the rights of the patient shall be exercised by the person appointed under State law to act on the patient's behalf, to include the patient's right to Personal privacy; care in a safe-setting; and, freedom from abuse or harassment.
6. Execute a verbal or written grievance for any reason. Further, the patient has a right to exercise his or her rights without being subjected to discrimination or reprisal and voice grievances regarding treatment or care that is (or fails to be) furnished.

GRIEVANCE POLICY

The facility strives to provide quality care and achieve patient satisfaction. Patient grievances or complaints provide a means to measure achievement of this goal and to identify a need for performance improvement. Patients may register a complaint concerning any aspect of care or service provided by the facility. All allegations will be investigated and documented by the facility administrator.

PROCEDURE: Each patient shall receive a written patient questionnaire giving him/her an opportunity to evaluate the care provided.

- Any patient may express concerns through the said questionnaire or by a simple informal complaint. Such a complaint may be registered by telephone, in writing or in person to any member of the center staff. All complains received will be forwarded to the administrator the same day.
- The administrator or designee will attempt to address and resolve the concern by telephone or in person within 3 business days.
- If subsequent to this contact by the center, the patient continues to have a concern, the patient may submit the complaint or grievance in writing to the administrator or medical director. The person in authority will consider the submitted grievance and may request additional information or documentation.
- Once the collection of relevant information for the grievance is determined to be complete, the medical director will respond to the grievance in writing within thirty (30) days. If the person in authority is not able to make a determination within this thirty (30) day period, they will notify the patient in writing regarding the status of the grievance.
- The governing board will be informed of all patient complaints.
- All alleged violations/grievances related to but not limited to mistreatment, neglect, verbal, mental, sexual or physical abuse shall be documented. All allegations must be immediately reported to a person in authority in the center.
- Substantial allegations will be reported to the State authority or the local authority or both.
- Documentation of the grievance will include the following:
 - a. How the grievance was addressed
 - b. Providing the patient with written notice of the decision, the name of the ASC contact person, the steps taken to investigate the grievance, the results of the grievance process and the date the grievance process was completed.

CONTACT INFORMATION:

Patients with complaints or grievances may contact any of the following –

- A. Physicians Surgical Center Administrator
1840 Quentin Road, Lebanon, PA 17042
717-272-0007
Email: mmonk2@surgerypartners.com
- B. Division of Acute & Ambulatory Care
Health & Welfare Bldg., 625 Forster Street, Room 532; Harrisburg, PA 17120
800-254-2164
www.portal.state.pa.us
- C. Centers for Medicare and Medicaid Services, Ombudsman
7500 Security Boulevard; Baltimore, MD 21244-1850
800-633-4227
www.cms.hhs.gov/center/ombudsman.asp
- D. AAAHC (Accreditation Association for Ambulatory Health Care, Inc.)
3201 Old Glenview Road, Suite 300
Wilmette, Illinois 60091
847-853-6060

PATIENT RESPONSIBILITIES

1. Every patient is responsible for following facility policies and procedures affecting patient care and conduct.
2. Every patient is responsible for providing a complete and accurate medical history.
3. Every patient is responsible for providing documentation with regard to advance directives and/or healthcare surrogates. If unfamiliar with the above, please ask a Front Office Representative and they will be happy to assist you.
4. Every patient is responsible for making it known whether he/she clearly comprehends the contemplated course of action and the things he/she is expected to do.
5. Every patient is responsible for being considerate of the rights of other patients and facility personnel and property.
6. Every patient is responsible for providing the facility with accurate and timely information concerning his/her sources of payment and ability to meet financial obligations.

ADVANCED DIRECTIVES

As required by Pennsylvania Law and COBRA Patient Self-Determination Act of 1990, information is made available to our patients concerning their rights to execute directives.

Information is provided concerning the following directives:

- Living Wills
- Health Care Proxy
- Durable Power of Attorney

It is the policy of PHYSICIANS SURGICAL CENTER to treat all patients equally in the provision of medical care without regard as to whether or not the patient has executed an advance directive. It is our intent to sustain life with extraordinary efforts should the need arise. If a patient has an advance directive or living will, the Center will still transfer the patient to the closest hospital which will make decisions about following any advance directive or living will. The Center will not honor do not resuscitate advance directives. Patients may bring a copy of their advance directive or living will to be filed with the patient chart. Should an emergency arise, the advance directive or living will be sent with the patient to the hospital.

This brochure is intended solely for information as required by law. Patients should consult with their family attorney, physician or other advisors before making any decision. The patient is under no obligation to obtain any of the above documents.

