

## Mississippi Valley Surgery & Endoscopy Center “Patient Rights and Responsibilities”

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Health care involves a partnership between patients, families and health care providers. Each member of the partnership has certain rights and responsibilities. When you are well informed, participate in treatment decisions, and communicate openly with your health professionals, you help make your care as effective as possible. Mississippi Valley Surgery & Endoscopy Center encourages respect for the personal preferences and values of each individual. When you are a patient at Mississippi Valley Surgery & Endoscopy Center, your rights include the following:

1. **You have the right** to considerate and respectful care in a safe and secure environment.
2. **You have the right** to be are provided, to the degree known, information concerning their diagnosis, evaluation, treatment, and prognosis. When it is medically inadvisable to give such information to a patient, the information is provided to a person designated by the patient or to a legally authorized person.
3. **You have the right** to know the names and roles of people treating you.
4. **You have the right** to change physician or healthcare provider if other qualified providers are available.
5. **You have the right** to consent to or refuse a treatment, as permitted by law, throughout your stay. If you refuse a recommended treatment, you will receive other needed and available care without being subjected to discrimination or reprisal.
6. **You have the right** to have an advance directive, such as a living will or durable power of attorney for healthcare. These documents express your choices about your future care or name someone to decide if you cannot speak for yourself. If you have a written advance directive, you should provide a copy to Mississippi Valley Surgery & Endoscopy Center, your family, and your doctor. If you do not have one and would like a form, we will provide one if requested. Due to the nature of the services provided, it is our policy that the center staff will always attempt to resuscitate a patient and transfer that patient to a hospital in the event of deterioration of their medical condition. A copy of the patient’s advance directives will accompany the patient upon transport.
7. **You have the right** to privacy. *Mississippi Valley Surgery & Endoscopy Center*, your doctor, and others caring for you will protect your privacy as much as possible.
8. **You have the right** to expect that treatment records are confidential unless you have given permission to release information or reporting is required or permitted by law. When *Mississippi Valley Surgery & Endoscopy Center* releases records to others, such as insurers, it emphasizes that the records are confidential.
9. **You have the right** to review your medical records and have the information explained, except when restricted by law.
10. **You have the right** to expect that the center will give you necessary health services to the best of its ability. Treatment, referral or transfer may be recommended. If transfer is recommended or requested, you will be informed of risks, benefits, and alternatives. You will not be transferred until the other institution agrees to accept you.
11. **You have the right** to know if *Mississippi Valley Surgery & Endoscopy Center* has relationships with outside parties that may influence your treatment and care. These relationships may be with educational institutions, or other health care providers, or insurers.
12. **You have the right** to consent or decline to take part in research affecting your care. If you choose not to take part, you will receive the most effective care the facility otherwise provides.
13. **You have the right** to know about *Mississippi Valley Surgery & Endoscopy Center* guidelines that affect you and your treatment and about charges and payment methods. You have the right to know about the center’s resources, such as patient representatives that can help you resolve problems and questions about your stay and care.
14. **You have the right** to know how to voice grievances regarding treatment or care that is (or fails to be) furnished. You have the right to be informed about our grievance policy.
15. **You have the right** to know the identity of persons providing care, treatment or services and, upon request, be informed of the credentials of healthcare providers and, if applicable, the lack of malpractice coverage, if requested.
16. **You have the right** to treatment without regard to age, race, color, religion, nationality, gender, gender identity, sexual orientation, mental disability or physical disability. You have the right to be free from all forms of abuse or harassment. You have the right to be free from act of reprisal.

**You have responsibilities as a patient. They include the following:**

1. **You are responsible** for providing complete and accurate information to the best of your ability about your health, any medications, including over-the-counter products and dietary supplements, and any allergies or sensitivities.
2. **You are responsible** for asking questions when you do not understand information or instructions.
3. **You are responsible** for telling your doctor if you believe you cannot follow through with your treatment.
4. **You are responsible** for reporting unexpected changes in your condition to the practitioner responsible for your care.
5. **You, and/or your family, when appropriate, are responsible** for following the plan of care developed with the health care practitioner. Your family can play an important part in promoting your recovery, and there may be times when it may be appropriate to include them in your plan of care.
6. **You are responsible** for expressing any concerns regarding your ability to comply with the proposed treatment, and every effort will be made to meet your specific needs and limitations.
7. **You are responsible** for understanding the consequences of treatment alternatives and of disagreement with the proposed course of treatment.
8. **You are responsible** for providing a responsible adult to transport you home from the facility and remain with you for 24 hours, if required by your physician.
9. **You are responsible** for providing information for insurance and for working with the Center to arrange payment, when needed. *Mississippi Valley Surgery & Endoscopy Center* works to provide care efficiently and fairly to all patients and the community.
10. **You are responsible** for recognizing the effect of lifestyle on your personal health. Your health depends not only on our health care but also in the long term, on the decisions you make in your daily life.
11. **You are responsible** for being respectful of all the health care providers and staff, as well as other patients.

To report a complaint or grievance, you may contact:

Mississippi Valley Surgery & Endoscopy Center  
3400 Dexter Court, Suite 200  
Davenport, Iowa 52807  
ATTN: Patient Grievance  
563-344-6600 or Fax to 563-344-6699

*Iowa Department of Inspections and Appeals  
Health Facilities Division, Complaint Department  
Lucas State Office Building---321 East 12<sup>th</sup> Street  
Des Moines, Iowa 50319-0083  
Complaint Hot Line 877-686-0027 Fax to 515-281-7106*

Or the Office of Medicare Beneficiary Ombudsman at <http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html> The role of the Medicare Beneficiary Ombudsman is to ensure that Medicare beneficiaries receive the information and help them need to understand their Medicare options and to apply their Medicare rights and protections.

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