Advance Directive

Purpose of an Advanced Directive Policy:

The purpose of this policy is to implement Referral requirements pursuant to the Patient Self Determination Act requiring our facility to inform patients of their rights regarding decisions concerning medical care. We want you to be informed about your rights and responsibilities as a patient prior to receiving care.

What is an Advance Directive?

An Advance Directive is a way for you to specify your wishes about health care treatment options. It allows you to have control over healthcare decisions when you can no longer speak for yourself. There are several directives recognized by the State of Kansas and you may choose to sign none, one or all of these documents, These are available open request.

Advance Directive Policy:

Some provisions of Advance Directives are not intended for use in ambulatory surgery centers because the procedures performed are elective procedures. In the event a life threatening emergency occurs (i.e. respiratory of cardiac arrest), the following will be implemented on all patients:

- A. Perform emergency procedures as necessary to stabilize all of our patients
- B. Transfer the patient to an acute health care facility where the attending physician can make an informed decisions regarding the patient's well being.
- C. Upon transfer of the patient, the presence of an Advance Directive will be clearly identified and copies of all records and documentation sent.



Hutchinson Ambulatory Surgery Center

2205 N. Waldron Hutchinson, KS 67502 (620) 728-2700

Hutchinson Clinic Endoscopy Center

2107 N. Waldron Hutchinson, KS 67502 (620) 669-2798

www.hutchclinic.com

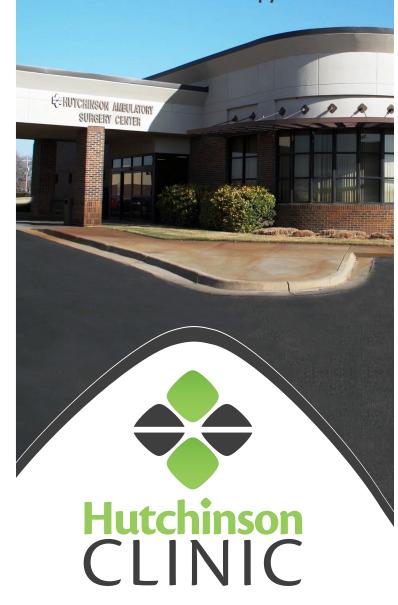
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-620-669-2500 or 1-800-779-6979.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-620-669-2500 or 1-800-779-6979.

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Patient Rights & Responsibilities

Hutchinson Ambulatory Surgery, LLC Hutchinson Clinic Endoscopy Center





All patients have the right to the following:

- **1.** Receive respectful care from competent personnel in a safe setting;
- Receive enough information about any proposed treatment or procedure as may be necessary to give informed consent or refuse; and the expected outcomes before it is performed.
- **3.** Participate in developing and implementing your plan of care and to be able to make your own health care decisions:
- 4. Appropriate assessment and management of pain;
- Access information contained in your medical record;
- Personal Privacy and Privacy of your health condition and security of self belongings during the delivery of your services;
- 7. Examine and receive an explanation of your bill regardless of source of payment;
- **8.** To receive these rights without regard to sex, cultural, economic, educational, religious background or the source of payment for care;
- The Right to be free from discrimination or reprisal;
- 10. Be free from all forms of abuse or harassment:
- To know the physician performing his/her procedure may have financial interest or ownership in this ASC;
- **12.** To discharge instructions, including information about after hours' care:
- 13. To receive the policy on advance directives, and living wills in the facility and to be given information upon request;
- **14.** Voice grievances regarding treatment or care that is (or fails to be) provided.

All patients have certain responsibilities as well as rights. The patient responsibilities are as follow:

- To provide accurate and complete information concerning your present illness, past illnesses and hospitalization and other matters relating to your health;
- 2. Making it known whether you clearly understand the course of your treatment and what is expected of you;
- Follow the treatment plan established by your physician, including the instructions of nurses and other health professionals as they carry out the physician's orders;
- 4. Being responsible for your actions should you refuse treatment or not follow your physician's orders.
- Assuring that the financial obligations of your care are fulfilled as promptly as possible;
- **6.** Being considerate of the rights of the other patients and facility personnel;
- **7.** Being respectful of your personal property and that of other persons in the facility.

Patient Grievance

In an attempt to offer quality care on both a personal and professional level, patients shall be encouraged to make comments on the care they receive at the Centers.

Any patient who feels that he/she has not been given appropriate care has the right to express their concerns and receive a response to their concerns within ten working days.

If you have a concern, please ask any employee of the Center for a Patient/Family Complaint or Grievance form and return the form to the Center or you may call or ask to speak with the director of surgery or nurse manager about the issue. You may also call the Kansas Department of Health and Environment Hotline at 1-800-842-0078 or contact Medicare Beneficiary Ombudsman at 1-800-633-4227 or http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html

Disclosure of Ownership

We are required to notify you that physicians at the Hutchinson Clinic, P.A. may have ownership in the Hutchinson Ambulatory Surgery Center and the Hutchinson Clinic Endoscopy Center. You have the right to choose a facility where the physician does not have ownership if you believe that is in your best interest.

Hutchinson Clinic Stockholders include:

Drs. Ahmed, Ashraf, Clarke, Davidson, Denison, Drieling, Epp, Estephan, Fan, Fluck, Gaeddert, Gee, Gleason, Goin, Green, Hagley, Hart, Holzman, Jackson, Kelley, Kempke J, Little, Losew, Lower, Marshall, Mattar, Miller L., Mills, Norris, Patry, Paulsrud, Pauly C, Pauly S, Reed, Ruhlmann, Salahuddin, Sanders, Schekall, Schlotterback, Shaw, Starkey, Thode, Thompson, Voorman, Wesley, Yackley

