**PATIENT RIGHTS AND RESPONSIBILITIES**

**As a patient at Oregon Surgical Institute, you have the right to:**

1. Considerate, respectful care at all times and under all circumstances, with recognition of your personal dignity.
2. Personal and informational privacy, within the law.
3. Information concerning your diagnosis, treatment, and prognosis, to the degree known.
4. Receive care in a safe setting.
5. Be treated under the least restrictive conditions and not be subject to unnecessary physical restraints or isolation.
6. Confidentiality of records and disclosures. Except when required by law, you have the right to approve or refuse the release of records.
7. Be fully informed about a treatment or procedure and the expected outcome before it is performed.
8. Be informed of benefits, possible side effects, and risks of medications and treatment procedures.
9. Participate in and make decisions about medical care, including the right to accept or refuse medical or surgical treatment explained in terms that are understandable to you.
10. Know that the facility does not honor advance directives; however, any advance directive will be noted in the patient medical record and will be communicated to other medical facilities if a transfer is needed.
11. Receive information on advance directive state health and safety laws and the official state advance directive forms, if requested.
12. Receive medications only for your clinical needs.
13. Be free from all forms of abuse or harassment.
14. Impartial access to treatment regardless of race, color, sex, national origin, religion, sexual orientation, handicap, or disability. The surgery center adheres to all federal and state rules, regulations, and policies to promote a non-discriminatory environment for our patients.
15. Be informed of the facility’s rules and regulations regarding his or her conduct.
16. Continuity of care, including appropriate follow-up care planned and initiated at time of discharge.
17. Receive estimated costs prior to the day of surgery and, as a follow up, receive an itemized bill for all services received.
18. Know that your physician may have financial interest or ownership in the surgery center. A physician owner list is provided on a separate document.
19. Know the identity and professional status of individuals providing service to you.
20. Report any comments or voice any grievances concerning the quality of services provided to you during the time spent at the facility without being subjected to discrimination or reprisal and receive timely, fair follow-up on your comments.

**As a patient at Oregon Surgical Institute, you are responsible for:**

1. Providing, to the best of your knowledge, accurate and complete information about your present health status and past medical history and reporting any unexpected changes to the appropriate practitioner(s).
2. Following the treatment plan recommended by the primary practitioner involved in your case.
3. Providing an adult to transport you home after surgery and an adult to be responsible for you at home for the first 24 hours after surgery.
4. Indicating whether you clearly understand a contemplated course of action and what is expected of you.
5. Your actions and adverse consequences that may result if you refuse treatment, leave the facility against the advice of the practitioner, and/or do not follow the practitioner’s instructions relating to your case.
6. Assuring that your portion of financial payment is submitted as quickly as possible.
7. Providing information about and/or copies of any living will, power of attorney, or other directives that you desire us to know about.
8. Refraining from smoking on campus.