Patient Disclosures

As a Patient you have the right to:

- Be informed of rights (both verbally and in writing) as a patient (or patient's representative) prior to, or when discontinuing, the provision of care. A list of these rights shall be posted within the surgery center so that such rights may be read by all patients.
- Exercise these rights without regard to age, race, disability, sex or cultural, economic, education. or religious background or the source of payment for care given.
- Formulate advance directives regarding your healthcare, and have surgery center staff and practitioners who provide care in the surgery center comply with these directives (to the extent provided by state laws and regulations):
- Be treated with dignity and receive considerate and respectful care provided in a safe environment free from all forms of abuse, neglect or harassment.
- Remain free from seclusion or restraints of any form that are not medically necessary.
- Expect reasonable safety while in the surgery center.
- The name of the physician and staff who will be providing care and the name and professional relationships of other physicians and non-physicians who will participate in care.
- o Receive appropriate information regarding provider
- Receive as much information about any proposed treatment or procedure as needed in order to give informed consent or to refuse this course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved in this treatment, alternate course of treatment or nontreatment and the risks involved in each in terms the patient can understand. Augusta Retina-Laser Surgicare will not honor DRN (Do Not Resuscitate) orders on any patient in this surgery center.
- Participate actively in decisions regarding medical care.

To the extent permitted by law, this includes the right to request and/or refuse treatment.

 Express a complaint regarding care or any violation of your rights without being subjected to discrimination or

 Be advised of the surgery center's grievance process should you wish to communicate a concern regarding the quality of the care you receive.

Notification of the grievance process includes:

whom to contact to file a grievance, and that you will be provided with a written notice of the grievance determination that contains the name of the surgery center contact person, the steps taken on your behalf to investigate the grievance, the results of the grievance and the grievance completion date.

- Change physicians if desired, either within the surgery center or another physician of your choice.
- Full disclosure of the privacy policy and full consideration of privacy concerning the medical care program. Confidential treatment of case discussion, consultation, examination and treatment, and all communications and records pertaining to your care at the surgery center. You have the right to be advised as to the reason for the presence of any individual involved in your healthcare. Your written permission shall be obtained before medical records can be made available to anyone not directly concerned with your care.
- Access information contained in your medical records within a reasonable time frame in accordance with state/federal laws and regulations.
- o Reasonable responses to any reasonable requests made for service.
- Leave the surgery enter even against the advice of the attending physician.
- Reasonable continuity of care.
- Be informed by the attending physician or designee of the continuing health care requirements following discharge.
- Obtain information before scheduled surgery about payment requirements of the bill, regardless of source of payment. Examine and receive an explanation of the bill regardless of source of payment.
- If eligible for Medicare, to know upon request and in advance of treatment whether a healthcare provider or facility accepts the Medicare assignment rate.
- Be advised if physician/surgery center proposes to engage in or perform human experimentation affecting the care or treatment. You have the right to refuse to participate in such research projects or clinical trials.
- Receive appropriate knowledge regarding absence of malpractice Insurance.

o Receive pastoral care as requested and as appropriate to your needs.

All surgery center personnel, medical staff members and contracted agency personnel performing patient care activities shall observe these patients' rights.

As a Patient you have the responsibility to:

• The care you receive depends partially on you.

Therefore, in addition to these rights, you have certain responsibilities as well. These responsibilities should be presented to you in the spirit of mutual trust and respect:

- Provide accurate and complete information about present complaint, past illnesses, hospitalizations, any medications, including over-the-counter products and dietary supplements and any allergies or sensitivities, and other matters related to your health status.
- Make it known whether course of treatment and what is expected of you is clearly understood.
- Follow the treatment plan established by the physician, including the instructions of nurses and other health professionals as they carry out the physician's orders.
- Provide a responsible adult to transport you home from the ASC and remain with you for 24 hours if required by the physician.
- Keep appointments and notify the surgery center or. physician when unable to keep an appointment
- Accept responsibility for any actions resulting from the refusal to follow treatment or physician's orders.
- Inform the physician about any living will, medical power of attorney, or other directive that could affect your care.
- Accept and ensure that the financial obligations of care are fulfilled as promptly as possible.
- Follow surgery center policies and procedures.
- Be considerate of the rights of other patients and surgery center personnel.
- Be respectful of personal property and that of other persons in the surgery center.

Augusta Retina-Laser Surgicare strives to provide excellent patient care and service.
If you should have a concern or complaint, please tell us so we can work to satisfy your needs. Ask to speak to the Nurse Manager/Administrator.

Ownerships

- Please be advised that Dr. Dennis M. Marcus owns an interest In Augusta Retina-Laser Surgicare.
- You are entitled to obtain the services for which you have been referred to Augusta Retina-Laser Surgicare at the location of your choice.
- Alternative sources of the services for which you have been referred to this entity are as follows:

University Hospital

Summerville

2260 Wrightsboro Rd.

Augusta, GA 30904

Augusta State University Health

1120 15th Street Augusta, GA 30912

Advance Directives

- Augusta Retina-Laser Surgicare is an outpatient surgery center that is limited to elective surgery only and performs no high-risk surgical procedures.
- It Is the policy of Augusta Retina-Laser Surgicare to recognize your Health Care Agent should circumstances require, but in the event of an emergency you will be stabilized and transferred to a hospital as soon as possible.
- Therefore, Augusta Retina-Laser Surgicare will not acknowledge DNR (Do Not Resuscitate) orders on any patient while in this surgery center.
- For information on advance directives, reference: https://gaelo.org/education/ga-end-of-life-documents/