

Patient Bill of Rights

The following is a list of patient rights and responsibilities that Alliance Spine and Pain Center, P.C. supports

The patient has a right....

- ❖ To reasonable access to care.
- ❖ To care that is considerate and respectful of his or her personal values and beliefs.
- ❖ To be informed about and participate in decisions regarding his or her care.
- ❖ To participate in ethical questions that arise in the course of his or her care, including issues of conflict resolution, withholding resuscitative services, foregoing or withdrawal of life-sustaining treatment, and participation in investigational studies or clinical trials.
- ❖ To security and personal privacy and confidentiality of information.
- ❖ To appropriate assessment and management of pain.
- ❖ To access protective services.
- ❖ To issue a concern or complaint and may do so at any time to clinical personal or note findings on patient satisfaction survey.
- ❖ To designate a decision maker in case the patient is incapable of understanding a proposed treatment or procedure or is unable to communicate his or her wishes regarding care.
- ❖ To know their patient rights
- ❖ To have the staff educated about patient rights and their role in supporting their rights.

The patient/family has a responsibility...

- ❖ To provide, to the best of their knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other health matters.
- ❖ To report unexpected changes in patient's condition to a responsible practitioner whether or not the patient clearly comprehends the course of treatment.
- ❖ To follow the treatment plan developed and communicate concerns regarding patient's ability to comply with treatment.
- ❖ To understand the consequences of treatment alternatives and of noncompliance with the proposed treatment.
- ❖ To accept responsibility for outcomes if treatment is refused or instructions are not followed.
- ❖ To follow Alliance Spine and Pain Centers rules and regulations affecting patient care and conduct.
- ❖ To be considerate of other patients and personnel regarding noise, smoking, property and distractions.
- ❖ To assist the care givers in assessment of pain. To report initial pain or unrelieved pain to care givers as well as pain relief.
- ❖ To understand that Alliance Spine and Pain Centers does recognize advance directives, however does not recognize "Do Not Resuscitate" orders.

If you believe your privacy rights have been violated, please contact:
Wayne Bryant, Compliance Officer
3390 Peachtree Rd NE Suite 1500
Atlanta, GA 30326
Contact Number: 678-399-4099

If you have any concerns regarding "Safety and Quality" please contact:
The Joint Commission)
Contact Number: 1-847-853-6060
<http://www.jointcommission.org>

Or you may file a complaint through the Department of Community Health:
2 Peachtree St 31st Floor Atlanta, GA 30303
<http://Dch.georgia.gov/healthcare-facility-regulation-0>
Contact Number: 404-656-4507

All Medicare beneficiaries may also file a complaint/grievance with the CMS:
<http://www.medicare.gov/Ombudsman/activities.asp>
Contact Number: 1-800-MEDICARE (633-4273)

Patient Signature

Date