## PATIENT'S RIGHTS & RESPONSIBILITIES

## RIGHTS

- Every patient has the right to courtesy, respect, dignity, personal privacy, responsiveness, and timely attention to his/her needs. These rights are regardless of age, race, sex, nationality, religion, cultural, physical handicap, and personal values and beliefs.
- Every patient has the right to every consideration of his privacy and individuality as it relates to his social, religious, and psychological well being.
- Every patient has the right to confidentiality.
- Every patient has the right to approve or refuse the release of medical information to any individual outside the facility, except in the case of transfer to another health facility, or as required by law or third party payment contract.
- Every patient has the right to express grievances or complaints without fear of reprisals.
- Every patient has the right to continuity of health care. The physician may not discontinue treatment of a patient as long as further treatment is medically indicated, without giving the patient sufficient opportunity to make alternative arrangements.
- Every patient is provided complete information regarding diagnosis, treatment and prognosis, alternative treatments or procedures and the possible risks, expected outcomes, and side effects associated with treatment before it is performed. If medically inadvisable to disclose to the patient such information, the information is given to a patient representative, a surrogate or an individual legally authorized by the patient.
- Every patient has the right to make decisions regarding the health care that is recommended by the physician. Accordingly, the patient may accept or refuse any recommended medical treatment.
- Every patient has the right to be informed of any research or experimental projects and to refuse participation without compromise to the patients usual care.
- Every patient has the right to appropriate treatment and care including assessment and management of pain.
- Every patient has the right to understand facility charges. You have the right to an explanation of all facility charges related to your health care.
- Every patient has the right to all resuscitativemeasures; therefore we will not honor Advance Directives.
- Every patient has the right to be free from all forms of abuse or harassment.

## RESPONSIBILITIES

- Patients are responsible to be honest and direct about matters that relate to them, including answering questions honestly and completely.
- Patients are responsible to provide accurate past and present medical history, present complaints, past illnesses, hospitalizations, surgeries, existence of advance directive, medication and other pertinent data.
- Patients are responsible to agree to accept all caregivers without regard to race, color, religion, sex, age, gender, preference, handicap, or national origin.
- Patients are responsible for assuring that the financial obligations for health care rendered are paid in a timely manner.
- Patients are responsible to sign required consents and releases as needed.
- Patients are responsible for their actions if they should refuse a treatment or procedure, or if they do not follow or understand the instructions given to them by the physician or Surgery Center employees.
- Patients are responsible for keeping their procedure appointment. If they anticipate a delay or must cancel, they will notify the Surgery Center as soon as possible.
- Patients are responsible for the disposition of their valuables, as the Surgery Center does not assume the responsibility.
- Patients are responsible to be respectful of others, or other people's property and the property of the Surgery Center.
- Patients are to observe safety and no smoking regulations.

#### PATIENT COMPLAINT OR GRIEVANCE:

To report a complaint or grievance, you may contact the facility Administrator by phone at 301.968.3184 or by mail to our address. Complaints and grievances may also be filed through the:

#### Maryland Department of Health and Hygiene

Office of Health Care Quality Spring Grove Center, Bland Bryant Building 55 Wade Avenue Catonsville, MD 21228 Phone: Toll Free 1-800-492-6005

All Medicare beneficiaries may file a complaint or grievance with the Medicare Beneficiary Ombudsman online at: www.medicare.gov/ombudsman/resources.asp.



## DIRECTIONS

### From Arlington:

Take the Interstate 66 ramp
Merge onto I-66 W
Take exit 67 toward Dulles Airport/I-495 N/Baltimore
Merge onto VA-267 W
Take exit 18 for I-495 N toward Baltimore
Merge onto I-495
Slight left onto I-270 Spur N
Take exit 1 for Democracy Blvd.
Keep right at the fork and merge onto Democracy Blvd.
Turn right onto Old Georgetown Road
Turn right onto Arlington Road

#### From Fairfax:

Merge onto I-66 E via the ramp to Washington
Take the exit on the left toward Washington/Interstate 66 E
Slight right onto I-495 North
Slight left onto I-270 Spur N
Take exit 1 for Democracy Blvd.
Keep right at fork and merge onto Democracy Blvd.
Turn right onto Old Georgetown Road
Turn right onto Arlington Road

#### From Fredericksburg:

Merge onto I-95 N via the ramp to Washington Slight right onto Interstate 395 Connector N/Interstate 95 Connector N (signs for I-395 N/I-495 N/Washington/Tysons Corner)

Take exit 170B for I-495 N toward Tysons Corner
Merge onto I-495
Slight left onto 1270-Spur N
Take exit 1 for Democracy Blvd.
Keep right at the fork and merge onto Democracy Blvd.
Turn right onto Old Georgetown Road
Turn right onto Arlington Road

#### From South Riding/Ashburn:

Take the Virginia 267 E ramp to Washington
Merge onto VA-267 E
Take the Interstate 495 N exit
Keep left at the fork and merge onto I-495
Slight left onto I-270 Spur N
Take exit 1 for Democracy Blvd.
Keep right at the fork and merge onto Democracy Blvd.
Turn right onto Old Georgetown Road
Turn right onto Arlington Road





## **Specializing in:**

Neuro Spine Orthopaedics Pain Management

6931 Arlington Road / Suite E Bethesda, MD 20814 301.968.3184 **Bethesda Chevy Chase Surgery Center, LLC** is licensed by the state of Maryland. It was established in 2010 by hospital and clinical personnel to offer safe, high-quality surgical care. You will find that because the center specializes in outpatient surgery, our patients enjoy many advantages including personalized service and excellent medical care.



# Before Your Surgery

A nurse from the center will contact you prior to your surgery to review your health history, medications and pre-operative instructions.

Notify your surgeon if there is a change in your physical condition such as a cold, fever or respiratory problems.

Do not eat or drink anything after midnight the night before your operation, including no hard candy, or cigarettes. If your child is the patient, please be careful to enforce this. Also, please follow any other special instructions your surgeon may have given you. Failure to follow these instructions may result in cancellation of your surgery.

Please be sure to tell your surgeon if you are on any type of blood thinners or aspirin. Please do not take any medications after midnight unless instructed by your surgeon or the nurse at our center.

It is extremely important to arrange for a responsible adult to drive you home and remain with you the first 24 hours after surgery.



# The Day of Surgery

Wear loose, comfortable clothing that is big enough to accommodate a large bandage after surgery. Wear comfortable shoes such as slip-on, no high heels.

You will need to change into a surgical gown.

Do not wear any jewelry (including body piercing), makeup or cologne. Do not bring any valuables with you.

Bring your drivers license and all insurance cards with you.

Wearing contact lenses is NOT advised. We provide containers for removable dentures and bridgework.

If your child is having surgery, feel free to bring a favorite stuffed animal or security blanket for added assurance.



# After Your Surgery

You will be discharged to your car by wheelchair. If anesthesia has been administered, you must have a responsible adult present to drive you home and to care for you following surgery.

Your physician will provide post-operative instructions regarding diet, rest, exercise and medications. You will be provided with a written summary of these discharge instructions.

A nurse from the Surgery Center will attempt to call you the day after your surgery to check on your progress and discuss any questions you may have. If you have any unexpected problems, please call your doctor. If he/she does not respond, please go to the nearest emergency room.

Thank you for choosing the Bethesda Chevy Chase Surgery Center, LLC.

# ADVANCE DIRECTIVES In the state of Maryland, each person has the primary right to request or refuse medical treatment subject to the state's interest in protecting innocent third parties and to make Advance Directs or to execute powers of Attorney that authorize others to make decision on their behalf.

All patients have the right to participate in their own health care decisions and to make advance directives or to execute powers of attorney that authorize others to make decisions on their behalf based on the patient's expressed wishes when the patient is unable to make decisions or unable to communicate decisions. Bethesda Chevy Chase Surgery Center respects and upholds those rights.

However, unlike in an acute care hospital setting, Bethesda Chevy Chase Surgery Center does not routinely perform "high risk" procedures. Most procedures performed in this facility are considered to be of minimal risk. Of course, no surgery is without risk. You will discuss the specifics of your procedure with your physician who can answer your questions as to its risks, your expected recovery and care after your surgery.

Therefore, it is our policy, regardless of the contents of any advance directive or instructions from a health care surrogate attorney in fact, that if an adverse event occurs during your treatment at this facility we will initiate resuscitating or other stabilizing measures and transfer you to an acute care hospital for further evaluation. At the acute care hospital further treatment or withdrawal of treatment measures already begun will be ordered in accordance with your wishes, advance directive or health care power of attorney. Your agreement with this policy does not revoke or invalidate any current health care directive or health care power of attorney.

If you wish to complete an Advance Directive, copies of the official State forms are available at our facility. For additional information regarding advance directives, please visit www.oag.state.md.us.

# Helpful Reminders

Please limit the number of family or friends who come with you. Seating is very limited.

If you are driving more than 30 minutes, put one or two pillows in your car so you can elevate the operative extremity.

Females will need to give a urine sample for a pregnancy test pre-operatively.

If you or your family need the services of a foreign-language or hearing impaired interpreter, please call to arrange for one at no cost to you, **prior to the day of surgery.** 

# Billing Information

You will be informed about any coinsurance due for your surgery during your pre-operative call. This amount is due prior to, or on the day of your surgery. Please remember to bring a form of payment with you. We accept cash, checks and major credit ards. We are an out-of-network facility but we honor patient in-network benefits. Contact us with any questions about insurance.

After surgery Bethesda Chevy Chase Surgery Center, LLC will submit your bill to your insurance company. You will receive a separate bill from your doctor, anesthesiologist and/or pathologist.

Please do not hesitate to contact our business office with any concerns or questions regarding your coinsurance obligation and/or payment options.

| Name            |  |
|-----------------|--|
| Date of Surgery |  |

## Call 301.968.3184 with questions

#### **DISCLOSURE OF OWNERSHIP:**

Your physician has a financial interest in Bethesda Chevy Chase Surgery Center, LLC.