LIST OF PATIENT RIGHTS

IN ACCORDANCE WITH HEALTH AND SAFETY CODES, THE SURGERY CENTER FOR PAIN INTERVENTION AND MEDICAL STAFF HAS ADOPTED THE FOLLOWING LIST OF PATIENT RIGHTS:

Patient rights will be exercised without regard to sex or culture, economic, educational or religious background or the source of payment for his or her care.

1. Considerate and respectful care.
2. Knowledge of the name of the physician who has primary responsibility for coordinating his or her care and the names and professional relationships of other physicians who will see the patient.
3. Receive information from his or her physician about his or her illness, his or her course of treatment and his or her prospects for recovery in easily understood terminology.
4. Receive as much information about any proposed treatment or procedure as he or she may need in order to give informed consent or to refuse the course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved and knowledge of the person who will carry out the procedure or treatment.
5. Participate actively in decisions regarding his or her medical care, to the extent permitted by law, including the right to refuse treatment.
6. Full consideration of privacy concerning his or her medical care program. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. The patient has the right to know the reason for the presence of any individual.
7. Confidential treatment of all communications and records pertaining to his or her care and his or her stay at SCPI. His or her written permission shall be obtained before his or her medical records can be made available to anyone not directly concerned with his or her care.
8. Reasonable responses to reasonable requests he or she may make for services.
9. He or she may leave the facility, even against the advice of his or her physicians.
10. Reasonable continuity of care and advance knowledge of the time and location of appointment, as well as knowledge of the physician providing the care.
11. Be advised if the physician proposes to engage in or perform human experimentation affecting his or her care or treatment. The patient has the right to refuse to participate in any research projects.
12. Be informed by his or her physician, or a delegate of his or her physician, of his or her continuing health care requirements following his or her discharge from the Surgery Center.
13. May choose a different physician than was assigned to that patient.
14. Although Surgery Center for Pain Intervention does not accept Advanced Directives, you have the right to inform your health care team about any living will, medical power of attorney or other directives that may affect your care.
15. Be given notice of Financial Interest Disclosure. Surgery Center for Pain Intervention is owned by Lido Chen, M.D. Should you have any questions or concerns regarding this issue, please feel free to contact us.

For complaints or comments about your medical care, you may contact our Administrator @ 949-458-2026 or the following agency:
California Department of Public Health, Licensing and Certification, 2150 Town Center Place, Suite 210, Anaheim, CA 92806

PATIENT SIGNATURE__________________________________________  Date ____________________________

It is required that this form be signed at least 24 hours prior to appointment date.