

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 resuscitative-measures.
- 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 410.620-3348 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 Delaware

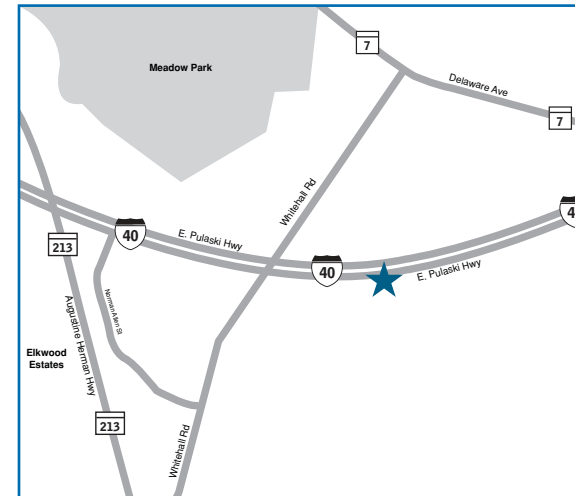
- Take I-95 S
- Take exit 1A to merge onto 896S toward Middletown
- Turn Right onto US40 W / West Pulaski Hwy
- At Whitehall Rd., do a U turn onto US 40 E
- Arrive at North Bay Professional Pavilion on Right

*The building immediately after Pizza Hut
We are on the 2nd floor of the building*

From Chestertown

- Take MD-213 N / Augustine Herman Hwy
- Turn Right onto US40 E / East Pulaski Hwy
- Arrive at North Bay Professional Pavilion on Right

*The building immediately after Pizza Hut
We are on the 2nd floor of the building*



Specializing in:

*Chiropractic
Neurosurgery
Ophthalmology
Orthopedics
Pain Management
Plastics
Surgical Dermatology*



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Elkton, MD 21921**

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Upper Bay Surgery Center, LLC is licensed by the state of Maryland. It was established in 2008 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.



Pain Management Injection General Instructions

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

Wear loose comfortable clothing. 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. If your insurance company requires a co-pay, please bring some form of payment.

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.

If you are not having sedation, do not eat or drink anything two hours prior to your procedure, including no hard candy, or cigarettes. Failure to follow these instructions may result in cancellation of your 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.

Pain Management Injection With Sedation

Do not eat or drink anything after midnight the night before your operation, including no hard candy, or cigarettes. Failure to follow these instructions may result in cancellation of your surgery.

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

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

Surgical Dermatology

Your time of surgery will be provided by your physicians office.

Wear loose comfortable clothing. You will need to change into a surgical gown.

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.

Thank you for choosing the Upper Bay 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 Directives 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. Upper Bay Surgery Center respects and upholds those rights.

However, unlike in an acute care hospital setting, Upper Bay 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.

Helpful Reminders

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

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

After surgery Upper Bay 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 contact our business office for any questions regarding your bill and/or payment options.

Parking

Our parking is directly out front and there are plenty of available spaces.

Name _____

Date of Surgery _____

Call 410-620-3348 with questions

DISCLOSURE OF OWNERSHIP:

Your physician may have a financial interest in Upper Bay Surgery Center, LLC.