

Patient’s Rights and Notification of

Physician Ownership

Every patient has the right to be treated as an individual and to actively participate in AND MAKE INFORMED DECISIONS REGARDING his/her care. The facility and medical staff have adopted the following patient rights and responsibilities, which are communicated to each patient or the patient’s representative/surrogate prior to the procedure/surgery.

**Patient’S Rights**

* A patient shall not be denied appropriate care on the basis of race, religion, national origin, sex, age, handicap, marital status, sexual preference, or source of payment.
* An individual may obtain or inspect his/her medical records and a third party shall not be given a copy without authorization of the patient except as required by laws and third party contract.
* A patient is entitled to privacy, to the extent feasible, in treatment and caring for personal needs with consideration, respect, and full recognition of his/her dignity and individuality.
* A patient is entitled to adequate and appropriate care and to receive information about his/her medical condition unless medically contraindicated by the physician in the medical record.
* A patient is entitled to receive and examine an explanation of his/her bill. Also, he/she is entitled to know who is responsible for his/her care.
* To be informed of their right to change providers if other qualified providers are available.
* A patient is entitled to associate and have private communication with his/her physician, attorney or any other person, and to receive personal mail unopened, unless medially contraindicated. A patient’s civil and religious liberties shall not be infringed upon and the facility shall encourage and assist in the exercise of these rights.
* A patient is entitled to be free from mental and physical abuse and from physical and chemical restraints, except those necessitated by an emergency to protect the patient and/or others.
* A health care facility, its owner, administrator, employee or representative shall not discharge, harass retaliate or discriminate against a patient because a patient has exercised rights protected by law.
* A patient is entitled to adequate and appropriate pain and symptom management as a basic essential element of his or her medical treatment.

**PATIENT RESPONSIBILITIES**

* To provide complete and accurate information to the best of their ability about their health, any medications, including over-the-counter products and dietary supplements and any allergies or sensitivities.
* To follow the treatment plan prescribed by their provider, including pre-operative and discharge instructions.
* To provide a responsible adult to transport them home from the facility and remain with them for 24 hours, if required by their provider.
* To inform their provider about any living will, medical power of attorney, or other advance healthcare directive in effect.
* To accept personal financial responsibility for any charges not covered by their insurance.
* To be respectful of all healthcare professionals and staff, as well as other patients

***If you need an interpreter:***

If you will need an interpreter, **please let us know** and one will be provided for you.  If you have someone who can translate confidential, medical and financial information for you please make arrangements to have them accompany you on the day of your procedure.

**Rights and Respect for Property and Person Privacy and Safety**

***The patient has the right to: The patient has the right to:***

• Exercise his or her rights without being subjected to discrimination or reprisal. • Personal privacy

• Voice a grievance regarding treatment or care that is, or fails to be, furnished. • Receive care in a safe setting

• Be fully informed about a treatment or procedure and the expected outcome before it is performed. • Be free from all forms of abuse or harassment

• Confidentiality of personal medical information.

**Statement of Nondiscrimination**

Blue Water Surgery Center, LLC complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Blue Water Surgery Center, LLC cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.

Blue Water Surgery Center, LLC respecte les lois fédérales en vigueur relatives aux droits civiques et ne pratique aucune discrimination basée sur la race, la couleur de peau, l'origine nationale, l'âge, le sexe ou un handicap.

Blue Water Surgery Center, LLC 遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。

**Advance Directives**

***An “Advance Directive” is a general term that refers to your instructions about your medical care in the event you become unable to voice these instructions yourself. Each state regulates advance directives differently. STATE laws regarding Advanced Directives are found in Michigan Statutes chapter 700.5507.1. The state of Michigan has no statutes providing for the use of living wills. However, Michigan statutes specifically state that “A patient advocate designation may include a statement of the patient’s desire on care, custody, and medical treatment. Further the Michigan Supreme court has ruled that “clear and convincing evident should be put in writing “in a living will, patient advocate designation, or durable power of attorney” .***

***You have the right to informed decision making regarding your care, including information regarding Advance Directives and this facility’s policy on Advance Directives. Applicable state forms will also be provided upon request. A member of our staff will be discussing Advance Directives with the patient (and/or patient’s representative or surrogate) prior to the procedure being performed.***

Blue Water Surgery Center, LLC respects the right of patients to make informed decisions regarding their care. The Center has adopted the position that an ambulatory surgery center setting is not the most appropriate setting for end of life decisions. Therefore, it is the policy of this surgery center that in the absence of an applicable properly executed Advance Directive, if there is deterioration in the patient’s condition during treatment at the surgery center, the personnel at the center will initiate resuscitative or other stabilizing measures. The patient will be transferred to an acute care hospital, where further treatment decisions will be made.

If the patient has Advance Directives which have been provided to the surgery center that impact resuscitative measures being taken, we will discuss the treatment plan with the patient and his/her physician to determine the appropriate course of action to be taken regarding the patient’s care.

**Complaints/Grievances**

If you have a problem or complaint, please speak to one of our staff to address your concern. If necessary, your problem will be advanced to center management for resolution. You have the right to have your verbal or written grievances investigated and to receive written notification of actions taken.

The following are the names and/or agencies you may contact:

Alexa , RN, Center Director

**Blue Water Surgery Center**

920 River Centre Drive

Port Huron, Michigan 48060

810-985-5200

You may contact the state to report a complaint:

**State Web site:** [**https://www.michigan.gov/mdcs/state-employment/general/michigan-department-of-community-health**](https://www.michigan.gov/mdcs/state-employment/general/michigan-department-of-community-health)

**COMPLAINT HOTLINE: 1-800-882-6006**

Medicare beneficiaries may also file a complaint with the Medicare Beneficiary Ombudsman.

* **Medicare Ombudsman Web site**:  [https://www.cms.gov/center/special-topic/ombudsman/medicare-beneficiary-ombudsman-home](https://urldefense.com/v3/__https%3A/www.cms.gov/center/special-topic/ombudsman/medicare-beneficiary-ombudsman-home__;!!DwJvy4M7!WBr_tLDmTRMznlfzJo9JE4D7RR9pB0ODEUKi35mNeS4q_Bwdc-nqh5VEkBYIEJ-el_81zJK0Ef32Uo-4S6p9$)

**Medicare:** [www.medicare.gov](http://www.medicare.gov/) or call 1-800-MEDICARE (1-800-633-4227)

**Office of the Inspector General:** [http://oig.hhs.gov](http://oig.hhs.gov/)

This facility is accredited by the **Accreditation Association for Ambulatory Health Care (AAAHC)**.  Complaints or grievances may also be filed through AAAHC:

3 Parkway North Blvd, Ste 201

Deerfield, IL 60015

Phone: 847-853-6060

**Physician Ownership**

**Physician Financial Interest and Ownership: Physician Financial Interest and Ownership:** The center is owned, in part, by the physicians. The physician(s) who referred you to this center and who will be performing your procedure(s) may have a financial and ownership interest. Patients have the right to be treated at another health care facility of their choice. We are making this disclosure in accordance with federal regulations.

THE FOLLOWING PHYSICIANS HAVE A FINANCIAL INTEREST IN THE CENTER:

Dr. William Braaksma, MD

Dr. Todd Murphy, MD

Dr. Scott Heithoff, DO

Dr. Matthew Sciotti, MD

Dr. Emily Tan, DO

Dr. Rajesh Makim, MD

Dr. E Neil Pasia, MD

**BLUE WATER SURGERY CENTER, LLC**

**920 RIVER CENTRE DRIVE**

**PORT HURON, MICHIGAN 48060**

**810-985-5200**

**Patient Label**