

You have selected Bahamas Surgery Center, a federally recognized Medicare Certified **Ambulatory Surgery Center, for your health** care services. Your physician may or may not have ownership interest in the Surgery Center as not all physicians who practice here have an owner- ship interest. As a patient you have the right to receive a list of all physician owners in the facility, upon request.

> Why chose an ASC? ASCs are the cutting edge of technology often the most current surgical innovation with utilizing the least invasive techniques allowing patients to return to their normal lifestyle sooner. ASCs are efficient, understanding that everyone's time is important. Their convenient surgical flow allows you less wait time and less bureaucracy and offers patient friendly family-centered environments. Many ASCs have undergone a rigorous accreditation process performed by an independent accrediting agency. You may find

What is an ASC?

ASCs are a facility for surgical patients who do not need to be admitted to the hospital. ASC patients typically arrive for

admission, have surgery performed in a full-service operating room with specialized staff, recover safely and quickly from anesthesia and return home within hours of their surgery. Some procedures require patients to stay for several hours to allow nurses to monitor their recovery.

What types of surgeries are performed in the ASC?

Depending on the ASC, the center may specialize in one service line such as orthopedic or spine, while other centers may offer multi-specialties such as ear, nose, and throat procedures, gynecological, orthopedic and podiatry procedures.

Bahamas Surgery Center

2400 Bahamas Drive, Suite 100 Bakersfield, California 93309

Bahamas SURGERY CENTER

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these accreditations posted in your local ASC. Bahamas Surgery Center is accredited by the Accreditation Association for Ambulatory Healthcare (AAAHC) and holds the highest standard of Medicare Deemed Certification.

Patient Rights and Responsibilities

PATIENT RIGHTS:

- Receive information about rights, patient conduct and responsibilities in a language and manner the patient, patient representative or surrogate can understand
- · Be treated with respect, consideration and dignity
- Be provided appropriate personal privacy
- · Have disclosures and records treated confidentially and be given the opportunity to approve or refuse record release except when release is required by law
- Be given the opportunity to participate in decisions involving their health care, except when such participation is contraindicated for medical reasons
- Receive care in a safe settina
- · Be free from all forms of abuse, neglect or harassment
- Exercise his or her rights without being subject to discrimination or reprisal with impartial access to medical treatment or accommodations, regardless of race, national origin, religion, physical disability, or source of payment
- Voice complaints and grievances without reprisal
- Be provided, to the degree known, complete information concerning diagnosis. evaluation. treatment and know who is providing services and who is responsible for the care. When the patient's medical condition makes it

inadvisable or impossible, the information is provided to a person designated by the patient or to a legally

authorized person · Exercise of rights and respect for property and persons, including the right to:

Voice grievances regarding treatment or care that is (or fails to be) furnished Be fully informed about a treatment or procedure and the expected outcome before it is performed. Have a person appointed under State law to act on the patient's behalf if the patient is adjudged incompetent under applicable State health and safety laws by a court of proper jurisdiction. If a State court has not adjudged a patient incompetent, any legal representative designated by the patient in accordance with the State law may exercise the patient's rights to the extent allowed by State law

- · Refuse treatment to extent permitted by law and be informed of medical consequences of this action
- Know if medical treatment is for purposes of experimental research and to give his/her consent or refusal to participate in such experimental research
- Have the right to change providers if other providers are available
- A prompt and reasonable response to questions and requests
- Know what patient support services are available, including whether an

interpreter is available if patient doesn't speak English Receive, upon request, prior to treatment, a reasonable estimate of charges for

- medical care and know, upon request and prior to treatment, whether facility accepts the Medicare assignment rate
- Receive a copy of reasonably clear and understandable, itemized bill and, upon request, to have charges explained
- Formulate advance directives and to appoint surrogate to make health care decisions on his/her behalf to the extent permitted by law and provide a copy to the facility for placement in his/her medical record
- Know the facility policy on advance directives
- · Be informed of the names of physicians who have ownership in the facility
- Have properly credentialed and qualified healthcare professionals providing patient care

PATIENT **RESPONSIBILITIES:**

- Providing a responsible adult to transport him/her home from the facility and remain with him/her for 24 hours. unless specifically exempted from this responsibility by his/her provider
- Providing to the best of his or her knowledge, accurate and complete information about his/her health, present complaints, past illnesses, hospitalizations, any medications, including overthe-counter products and dietary supplements, any

Patient Rights and Responsibilities

allergies or sensitivities, and other matters relating to his/her health

- Accept personal financial responsibility for any charges not covered by his/her insurance
- Following the treatment plan recommended by his/her healthcare provider
- Be respectful of all the health providers and staff, as well as other patients
- Providing a copy of information that you desire us to know about a durable power of attorney, healthcare surrogate, or other advance directive
- His/her actions if he/she refuses treatment or does not follow the treatment the healthcare provider's instructions
- Reporting any unexpected changes in his/her condition to the healthcare provider
- Reporting to his/her healthcare provider whether he or she comprehends a contemplated course of action and what is expected of him or her
- Keeping appointments

PATIENT CONCERNS AND/OR GRIEVANCES:

• Persons who have a concern or grievance regarding Bahamas Surgery Center, including but not limited to, decisions regarding admission, treatment, discharge, denial of services, quality of services, courtesy of personnel or any other issue are encouraged to contact the Administrator or write a statement to:

by telephone to:

California Department of Public Health District Manager 4540 California Ave, Suite 200 Bakersfield, CA 93309 1-866-222-1903 OR AAAHC 5250 Old Orchard Rd, Ste 200 Skokie, IL 60077 1-847-853-6060 OR Medicare patients should visit the website below to understand your rights and protections

ADVANCE DIRECTIVES

• An "Advance directive" is a general term that refers to your oral and written instructions about your future medical care, in the event that you become unable to speak for yourself. Each state regulates the use of advance directives differently. There are two types of advance directives: a living will and a medical power of attorney. If you would like a copy of the official State advance directive forms, visit http://www.calhospital.org/resou rce/advance-healthcaredirectice.

Administrator **Bahamas Surgery Center** 2400 Bahamas Dr. Suite 100 Bakersfield, CA 93309

 Bahamas Surgery Center is Medicare Certified. Any complaints regarding services provided at **Bahamas Surgery Center** can be directed in writing or

http://www.cms.hhs.gov/center/ ombudsman.asp

OUR SURGERY CENTER'S ADVANCE DIRECTIVE POLICY:

- The majority of procedures performed at the Surgery Center are considered to be of minimal risk. Of course, no surgery is without risk. You and your surgeon will have discussed the specifics of vour procedure and the risks associated with your procedure, the expected recovery and the care after your surgery.
- It is the policy of the Surgery Center, for all patients, regardless of the contents of any advance directive or instructions from a health care surrogate or attorney in fact, that if an adverse event occurs during your treatment at the Surgery Center, the personnel at the Surgery Center will initiate resuscitative or other stabilizing measures and transfer you to an acute care hospital for further evaluation (Cal. Probate Code §4735-4736). 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.
- However, if you have an Advance Directive or Do-Not-Resuscitate order in place, we can provide services once you and your surgeon speak, discuss expectations and agree to proceed with your surgery or procedure
- Patients who disagree with policy must address concerns prior to signing the form acknowledging understanding of the policy