

Winchester Orthopaedic Associates, Ltd.

Patient's Bill of Rights

As a patient, you have the right to:

- Receive impartial medical treatment and care.
- Receive considerate and respectful care.
- Obtain complete and current information concerning your healthcare
- Receive information to enable you to give informed consent prior to the start of any procedure or treatment.
- Collaborate and participate with your physician regarding your plan of care. You have the right to accept or refuse treatment to the extent permitted by law.
- Expect consideration of your privacy concerning your medical care.
- Expect confidentiality concerning your medical care and related records.
- Expect a response to your report of pain.
- Identification of all health professionals participating in your care.
- Review all charges related to your treatment.
- Inquire about financial assistance in paying your bill.
- Receive a reasonable explanation of Winchester Orthopaedic Associates, Ltd. rules and regulations that may apply to your conduct as a patient.
- Change specialty physicians.
- Communicate complaints or grievances.

Patient Responsibilities

As a patient, you have the following responsibilities:

- Provide a photo ID at the time of check-in to prevent potential identity theft.
- Communicate with all healthcare providers within our office in a considerate and respectful manner. The use of foul language or aggressive behavior will be addressed by the Administrator and/or the Physician. This behavior is not socially acceptable and will not be tolerated in or on clinic grounds.
- **Provide, to the best of your knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to your health on a yearly basis, and possibly more frequently.**
- Ask if you do not understand your illness or treatment; request more information if you need it.
- Follow the treatment plan that is recommended for you. Let your physician know if you are not willing or not able to follow the treatment plan that is recommended for you.
- Participate actively in your continued care after you leave the Winchester Orthopaedic Associates, Ltd. and keep follow-up appointments.
- Keep your appointment. If unable to do so, please notify the appointment desk of Winchester Orthopaedic Associates, Ltd.
- Pay your co-pay at the time of service.
- Pay your Winchester Orthopaedic Associates, Ltd. bill promptly.
- Promptly ask questions concerning your bill.
- **Provide the information necessary for insurance processing. We ask you to verify your name, address, telephone number and insurance coverage at each visit. We may possibly request you to update your insurance information as frequently as every office visit, and we may ask for your insurance card(s) to do so.**
- Provide Winchester Orthopaedic Associates, Ltd. with a copy of your Advanced Medical Directive and/or Power of Attorney (if one exists). This (these) document(s) will become a part of your medical record.
- Accompany any minor or mentally incapacitated patient and remain at Winchester Orthopaedic Associates, Ltd., until ready for discharge. A minor that appears for treatment without a parent or documented legal guardian will not be seen.
- Inform Winchester Orthopaedic Associates, Ltd. of any problem following treatment or surgery provided by the physician or physician extender.

Reference: President's Advisory Commission on Consumer Protection and Quality in Health Care Industry (www.hcqualitycommission.gov/fina/append_a.html)