

## **THE PAIN CENTER OF ARIZONA**

### **PATIENT RIGHTS AND RESPONSIBILITIES**

**As a patient at The Pain Center of Arizona, you have certain rights related to your medical care, and the time spent in the facility. These rights are as follows:**

You will be treated with consideration, respect, dignity and privacy in treatment and recovery activities.

You have access to a telephone or means of communicating with family and/or caregiver.

You have the right to be fully informed regarding a procedure or treatment. It is your doctor's duty to ensure informed consent for the patient and document it.

Informed consent includes, but is not limited to, the following explanations:

The recommended treatment or procedure in layman's terms and in a form of communication understood by you or your legal representative,

The risks and benefits of a treatment or procedure; the probability of success, risks, and serious side effects,

The alternatives with the risks and benefits of these alternatives,

The probable or likely consequences if no treatment is pursued,

The recuperative period, which includes a discussion of anticipated problems and the anticipated length of the recuperative period,

You may withdraw consent and to discontinue participation in the treatment or procedure,

You will be informed if your doctor or the Practice is participating in teaching programs and/or in research, experimental or educational projects relating to your care.

You or your legal representative has the right to:

Participate in all decisions involving your care or treatment,

Refuse any drug, test, procedure, or treatment, and to be informed of the probable or likely medical consequences of this action,

Information regarding the facility's rules and regulations as they apply to you,

Information about the Practice's grievance procedure,

Information about staff identification (how different staff members are identified),

The names, professional status, and experience of the staff that are providing care or treatment to the patient,

The Practice's Privacy Practices.

You have the right to care that is respectful, recognizes a person's dignity, and provides for personal privacy to the extent possible during the procedure or course of treatment.

You or your legal representative have the right of access to your medical records in accordance with Arizona state law and the federal Health Insurance Portability and Accountability Act (HIPAA).

Upon request by the you or your legal representative, the Practice shall disclose the estimated charge(s) for the procedure(s), and, based upon insurance information supplied by the you, to be given assistance in obtaining an estimate of any co-payment, deductible or other charges that will not be covered by a third party payer and must be paid by you or your legal guardian.

You or your legal representative have the right to be informed of the Practice's billing procedures prior to the initiation of treatment.

You have the right to submit complaints or grievances orally or in writing to Practice personnel during normal business hours. After hours, it may be called in and left as a voice mail, or sent by FAX or U.S. mail. The address is:

Marianne Scotto  
Director of Patient Services  
The Pain Center of Arizona  
14050 N. 83<sup>rd</sup> Avenue, Suite 190  
Peoria, Arizona 85381  
Telephone Number: 623-241-6105  
FAX Number: 623-241-6105

The Director of Patient Services will review and investigate your complaint, and respond to you within 10 calendar days of receiving it. You will be informed of the appropriate action(s) to be taken, or any delays required to resolve it.

If you have a complaint against a physician or other licensed professional, the Practice staff will inform you of the address of the appropriate board.

You are encouraged to speak out and present grievances. There will be no retaliation of any kind against you or your legal representative for submitting a complaint.