



**PATIENT RIGHTS:**

1. All patients will be treated with consideration, compassion, and respect as individuals. Employees will seek to honor their personal and religious beliefs that do not harm or interfere with the planned course of medical/surgical therapy.
2. Patients will receive care in a safe setting, and free from all forms of abuse or harassment. Their personal privacy will be respected at all times by all personnel.
3. Reasonable attempts will be made to communicate in the language or manner primarily used by the patient whenever possible.
4. Patients will be involved in all decisions about their care. Discussions with patients will include the necessity, appropriateness, and risks of proposed care, surgery, or procedure as well as discussions of treatment alternatives. If it is medically inadvisable to give such information to the patient, the information will be provided to a person designated by the patient or to a legally authorized person.
5. Patients will be fully informed of the scope of services available at the facility and will be given clear verbal and written instructions on the postoperative care of their wound and instructions on how to contact the physician on call in the event that they experience a medical problem after hours.
6. Patients will be informed of any human experimentation or other research/educational projects affecting his/her care or treatment and can refuse participation in such programs without compromise to the patient's medical care.
7. Each patient has the right to know the identity and professional status of individuals providing services to them and to know which physician or physician extender is primarily responsible for their care.
8. Patients have the right to refuse treatment to the extent permitted by law and will be informed of the medical consequences of such refusal.
9. Patients may approve or refuse the release of medical records to any individual outside the facility or as required by law or third-party payment contract. All individually identifiable health information will be treated as confidential in accordance with HIPAA guidelines.
10. Patients have the right to change providers if other qualified providers are available.

11. Each patient, upon request, will receive information regarding his/her insurance benefits and the cost of their care.
12. Patients have the right to exercise his/her rights without being subjected to discrimination or reprisal.
13. Patients may voice grievances regarding treatment or care that is (or fails to be) furnished.

If a patient is judged incompetent under applicable State health and safety laws by a court of proper jurisdiction, the rights of the patient are exercised by the person appointed under State law to act on the patient's behalf.

If a state court has not judged a patient incompetent, any legal representative designated by the patient in accordance with State laws may exercise the patient's rights to the extent allowed by State law.

**PATIENT RESPONSIBILITIES:**

1. Be respectful of all healthcare professionals and staff as well as other patients and visitors.
2. Respect the privacy of others by not taking pictures, videos, or other images and recordings of other children, family members, or staff, without their permission.
3. Do not bring weapons of any kind onto our campus.
4. Respecting that this is a smoke free campus.
5. Respecting the property of others and the facility.
6. Following the treatment plan prescribed by his/her provider and, if instructions are not followed, accepting responsibility for the outcome.
7. Actively participating in his/her care.
8. Keeping appointments and, when unable to do so for any reason, notifying the practice/facility.
9. Providing care givers with the most accurate and complete information regarding health history, medications including over the counter products, dietary supplements, and any allergies or sensitivities.
10. Promptly fulfilling his/her financial obligations to the practice/facility.
11. Identifying any patient safety concerns.
12. Provide a responsible individual for transport home from the facility and to remain with you for 24 hours if required by your provider.

### **NOTICE TO PATIENTS: Physician Financial Ownership**

We are required by Federal law to notify you that physicians have financial interests or ownership in this ASC. We are required by 42 C.F.R. § 416.50 to disclose this financial interest or ownership in writing prior to the surgical procedure. A list of physicians who have a financial interest in this ASC is listed below:

J. Patrick Weaver, D.M.D.

Robert V. Weaver, D.M.D.

### **NOTICE TO PATIENTS: Advanced Directives Policy**

Please note that our Facility's policy on Advanced Directives is that Life sustaining efforts will be initiated and maintained on all patients. If you would like information on developing Advanced Directives, the following website can assist you and includes a description of the State's health and safety laws, and upon request, we will provide you with official State advance directive forms.

[Chapter 765 Section 101 - 2019 Florida Statutes - The Florida Senate \(flsenate.gov\)](#)

[www.lakesidedentalsurgerycenter.com](http://www.lakesidedentalsurgerycenter.com)

### **HOW TO FILE A COMPLAINT OR GRIEVANCE**

You may file a complaint or grievance by contacting any of the following:

#### **Lakeside Dental Surgery Center Administrator**

(Reception will provide contact information)

#### **J. Patrick Weaver, D.M.D., Dental Director**

9143 Philips Highway

Suite 515

Jacksonville, FL 32256

#### **Florida Department of Health <https://floridahealth.gov>**

1-850-245-4444

#### **Medicare Ombudsman <https://www.medicare.gov/claims-and-appeals-medicare-rights-get-help-ombudsman.html>**

1-800-633-4117

#### **The Accreditation Association for Ambulatory Health Care**

1-847-853-6060