East Side Endoscopy, LLC

Patient Rights and Responsibilities

The patient has the right to exercise his or her rights without being subjected to discrimination or reprisal and receive services without regard to age, race, color, sexual orientation, religion, marital status, sex, national origin or sponsor.

- If a patient is adjudged 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 adjudged a patient incompetent, any legal representative designated by the patient in accordance with State law may exercise the patient's rights to the extent allowed by State law.

Respect

- Patients are treated with respect, consideration and dignity for both property and person.

Dignity/Privacy

- Patients are provided appropriate privacy and confidentiality including all information and records pertaining to the patient's treatment.
- Authorize those family members and other adults who will be given priority to visit consistent with your ability to receive visitors.

Consideration and Safety

- Receive care in a safe setting.
- Be free from all forms of abuse and harassment.

Confidentiality

- Patient disclosures and records are treated confidentially, and patients are given the opportunity to approve or refuse their release, except when release is required by law or third party payment contract.

Information Provided upon Request:

- Patients are provided, to the degree known, complete information concerning their diagnosis, evaluation, treatment and prognosis before the treatment or procedure is performed in terms the patient can understand. When it is medically inadvisable to give such information to a patient, the information is provided to a person designated by the patient or to a legally authorized person.
- Services available at the organization.
- Provisions for after-hours and emergency care.
- Fees for services, eligibility for third party reimbursement and, when applicable, the availability of free or reduced cost care and receive an itemized copy of his/her account statement, upon request.
- Payment policies.
- The credentials of health care professionals.
- The patient will be informed of his/her rights prior to their procedure being performed both verbally and in a manner in which the patient or the patient's representative understands. The center must protect and promote the exercise of such rights.
- Marketing or advertising regarding the competence and capabilities of the organization is not misleading to patients.
- Appropriate information regarding the absence of malpractice insurance coverage.
- Representation of accreditation to the public must accurately reflect the AAAHC accredited entity.
- Access to his/her medical record pursuant to the provisions of section 18 of the Public Health Law, and Subpart 50-3 of this Title.
- Receive from his/her physician information necessary to give informed consent prior to the start of any nonemergency procedure or treatment or both. An informed consent shall include, as a minimum, the provision of information concerning the specific procedure or treatment or both, the reasonably foreseeable risks involved, and alternatives for care or treatment, if any, as a reasonable medical practitioner under similar circumstances would disclose in a manner permitting the patient to make a knowledgeable decision.
- Patient's right to refuse to participate in experimental research or refuse treatment to the extent permitted by law and to be fully informed of the medical consequences of his/her actions.
- The patient has the right to actively participate in decisions about his/her care.
- Make known your wishes in regard to anatomical gifts. You may document your wishes in your health care proxy or on a donor card, available from the center.
- Patients are informed of their right to change their provider if other qualified providers are available.
- Patients are given the opportunity to participate in decisions involving their care, except when such participation is contraindicated for medical reasons.

Patient Complaint/Grievance:

The patient and family are encouraged to help the facility to improve its understanding of the patient's environment by providing feedback, suggestions, comments and or complaints regarding the service needs and expectations. A complaint or grievance should be registered by contacting the center administrator and/or patient advocate through the State Department of Health or Medicare. The center will respond in writing with notice of how the grievance has been addressed within 30 days of receipt.

Center Administrator
380 2nd Avenue - Concourse A
New York, NY 10010
Phone: 212-375-1065
Toll Free: 212-375-1069

Medicare Beneficiary Ombudsman
1-800-MEDICARE OR 1- 800-633-4227
*Website:**www.medicare.gov/claims-and-appeals/medicare-rights/get-help/Ombudsman.HTML***

New York State Department of Health's Office of Health System Management
90 Church Street. 15th Fl.
New York, NY 10007
Phone: 212-417-5927
Toll Free: 1-800-804-5447

New York State Department of Health Centralized Hospital Intake Program
Mailstop: CA/DCS
Empire State Plaza
Albany, NY 12237
*Website:**www.health.ny.gov/facilities/hospital/complaint/complaint_form.htm***

The patient has the responsibility to do the following:

- *Follow the treatment plan prescribed by his/her provider and participate in his/her care*
- *The patient is encouraged to ask any and all questions of the physician and staff in order that he/she may have a full knowledge of the procedure and aftercare.*
- *Provide complete and accurate information to the best of his/her ability about his/her health, any medications, including over-the-counter products and dietary supplements and any allergies or sensitivities.*
- *Provide a responsible adult to transport him/her home from the facility and remain with him/her for 24 hours, if required by his/her provider.*
- *Inform his/her provider about any living will, medical power of attorney, or other directive that could affect his/her care.*
- *Accept personal financial responsibility for any charges not covered by his/her insurance.*
- *Be respectful of all the health care providers and staff, as well as the other patients.*

Advance Directives

In accordance with NY State Public Health Law 2980-2994, we must inform you of the center policy on Advance Directives. Advance directives include but are not limited to a **health care proxy**, consent to a **do-not-resuscitate (DNR) order** recorded in your medical record and a **living will**.

Due to the fact that the East Side Endoscopy and Pain Management Center is an Ambulatory Surgery Center for the purpose of performing elective procedures in a safe and uncomplicated manner, patients are expected to have an excellent outcome. If a patient should have a complication, the center staff will always attempt to resuscitate the patient and transfer that patient to a hospital in the event of deterioration.

If a patient should provide his/her Directive, a copy will be placed on the patient's medical record and transferred with the patient, should a hospital transfer be ordered by his/her physician. In order to assure that the community is served by this center, information concerning advance directives/Healthcare proxy and DNR orders is available at the center and:

Information on Advance Directives
New York Advance Directive
Planning for Important Healthcare Decisions
Caring Info 1731 King Street, Suite 100 Alexandria VA 22314
Help Line: 800.658.8898 Multilingual Line: 877.658.8896
Email: caringinfo@nhpco.org Website: www.caringinfo.org

Physician Participation

This is to inform you that your physician may have ownership in this center:

Dr. Howard Antosofsky	Dr. Lawrence Attia	Dr. Michael Blechman	Dr. Brett Bernstein	Dr. Ira Breite
Dr. Ian Cohen	Dr. David Feldman	Dr. Melissa Kang	Dr. Jonathan Kung	Dr. Tracey Martin
Dr. Joseph Mizrahi	Dr. Babak Mohajer	Dr. Custon Nyabanga	Dr. Sarah Park	Dr. Ruvan Shein
Dr. Jason Rubinov	Dr. Moushumi Sanghavi			