

Gastroenterology Associates

Gastroenterology and Hepatology

PATIENT RIGHTS AND RESPONSIBILITIES

As a patient, you have the right to:

- Exercise your rights without discrimination or retaliation.
- Considerate, respectful care from all members of the health care team in a safe and non-judgmental atmosphere, free from all forms of abuse and harassment.
- A choice of health care providers that is sufficient to ensure access to appropriate high-quality health care.
- Be fully informed of planned procedure(s) and expected outcome(s), before a procedure is performed. An interpreter will be scheduled, at no cost to you, if needed.
- Participation in all decisions related to your health care, unless contraindicated by your health condition. If you are unable to fully participate in treatment decisions, you have the right to be represented by a family member(s), guardian(s) or Healthcare Durable Power of Attorney.
- Confidentiality, privacy and security of personal and health information as outlined in the G.A. Notice of Privacy Practices.
- Information regarding after hours and emergency care: For issues related to your care at G.A., contact (360) 413-8250. If urgent and after hours, press the option to be connected with the answering service to reach the on-call physician. For emergency issues, please be seen at the nearest hospital emergency room.
- A fair and efficient process for resolving differences with your G.A. health care provider or regarding the Endoscopy facility. Issues may be reported to the G.A. Endoscopy Nurse Manager at (360) 413-8155 or the WA State Department of Health Ambulatory Surgical Facility complaint line at 1-800-633-6828 or mail to: Complaint Intake, P.O. Box 47857, Olympia, WA 98504, or contact the Office of Medicare Beneficiary Ombudsman @ www.medicare.gov/Ombudsman/resources.asp.
- Information and forms regarding Advance Directives.
- To receive an explanation of your bill, regardless of source of payment. Information about the estimated charges of your health services is available upon request.

As a patient, you have the responsibility to:

- Provide accurate and complete information about your health care status including medications and past or present medical problems.
- Cooperate with your physician and G.A. staff by following G.A. policies and procedures and staff directions, by asking questions if something is unclear and by informing a staff member if you choose to refuse treatment.
- Report changes in your condition or symptoms, including pain, to a member of the health care team.
- Act in a considerate and cooperative manner and respect the rights of others.
- Inform G.A. in advance if you must cancel your appointment.
- Pay your bills and, if necessary, to make an arrangement with G.A. to meet your financial obligations.

Gastroenterology Associates Endoscopy Center is a physician owned ambulatory surgical facility.

Olympia Office / 500 Lilly Road NE, Suite 204, Olympia, WA 98506 / (360) 413-8250
Endoscopy Center / 500 Lilly Road NE, Suite 150, Olympia, WA 98506 / (360) 413-8250
Shelton Office / 939 Mountain View Dr., Suite 120, Shelton, WA 98584 / (360) 427-2733