



A Clarian Health Partner

Patient Expectations & Responsibilities

PATIENT EXPECTATIONS

As a patient of LaPorte Regional Physician Network you should expect:

1. **Consideration and Respect** - All patients will be treated equally regardless of age, sexual orientation, race, creed, color, religion, nationality, financial status, severity of illness, or ability to pay.
2. **Full Disclosure** - As a patient of this office, you will receive complete information concerning your diagnosis, prognosis and treatment from your physician in terms you can understand. When it is not medically advisable to give such information to you, as a patient, the information will be made available to the appropriate person on your behalf.
3. **Consent Explanation** - Before you sign a consent, you will be given a full explanation of: 1) the specific procedure and/or treatment, 2) the medically significant risks involved, 3) the probable length of hospitalization and recovery. If you ask for information about the medical alternatives, you will be given alternatives for care and treatment.
4. **The Option to Refuse Treatment** - Under most circumstances, you may refuse treatment and will be informed of the medical consequences of such actions. Through Advance Directives, you may provide information about living wills, medical directives, or designation of surrogate decision makers such as health care representatives or power of attorney for health care, and this office will honor the intent of these to the extent permitted by law.
5. **Consideration of Your Privacy** - Case discussion, consultation, examination and treatment are confidential and will be conducted with discretion. If you request it, a person of your same sex will be present during physical examinations and treatment or procedures performed by a health care professional of the opposite sex. Every effort will be made to protect your modesty and dignity.
6. **Confidentiality** - All communications and records pertinent to your care, including the source of payment and treatment, will be treated as confidential.
7. **Communication** - Every reasonable effort will be made to supply interpreters for you if you do not speak or understand English.
8. **The Right to Refuse Experimental Treatment** - You will be informed if the practice proposes any experimental treatment or procedures affecting your care or treatment. You may decline such treatment if you choose.
9. **Expert Care** - You will have specialists available to you, if you request it, for consultation and/or discussion of your treatment.

10. **Consideration** - Any request that you make will be given prompt consideration as long as it does not interfere with diagnostic procedures or treatment.
11. **Medical Follow-Up Information** - You will be given detailed information from your physician concerning your condition, should you be transferred. Also, you or the person responsible for your care will be informed of any continuing care requirements.
12. **Prompt Attention and Courtesy** - Any complaints or concerns about your care will receive prompt attention by the appropriate practice or administrative staff person. If you are dissatisfied, your complaint will not impact the care you receive. Your satisfaction is a primary concern to us.
13. **Continuity of Care** - Your attending physician and staff will work cooperatively with you to provide reasonable continuity of care by providing information about ongoing care options and assistance in accessing these services.
14. **An Explanation of Your Bill** - You should review your bill and question any charges for services you do not understand. As soon as practical after you notify the Billing Department, you will be given timely notice of changes in your eligibility for reimbursement by any third party payor for the cost of the care.

PATIENT RESPONSIBILITIES

1. **Provision of Information** - A patient should provide, as accurately as possible, complete information of present symptoms, past illnesses, hospitalizations medications, allergies, and other matters relative to medical history. It is important to report unexpected changes in physical condition to your primary doctor. Further, it is your responsibility to let the doctor know if you understand the contemplated treatment.
2. **Compliance Instructions** - The patient should follow the treatment plan recommended by his/her primary doctor. This may include following instructions of nurses and allied health personnel as they carry out the coordinated plan of care and implementing the doctor's orders. The patient is responsible for keeping appointments and, when unable to do so, for notifying the practice.
3. **Refusal of Treatment** - The patient is responsible for his/her actions if he/she refuses treatment or does not follow the practitioner's instructions.
4. **Practice Charges** - The patient is responsible for payment of the charges for health care as promptly as possible.
5. **Respect and Consideration** - The patient is responsible for being considerate of the rights of other patients and personnel, and for assisting in the control of noise. The patient is responsible for being respectful of the property of other persons.