

Every Patient Matters



You Have the Right...

- 1) **YOU HAVE THE RIGHT** to impartial access to all treatments, or accommodations that are available or medically indicated, regardless of race, creed, sex, national origin or religion. You will be accorded accommodation under the Americans with Disabilities Act, such as the services of an interpreter if needed.
- 2) **YOU HAVE THE RIGHT** to considerate, respectful care at all times and under all circumstances with recognition of your personal dignity.
- 3) **YOU HAVE THE RIGHT** to expect our staff members to display the highest regard for your privacy. You have the right to expect that all communications and records pertaining to your care are confidential.
- 4) **YOU HAVE THE RIGHT** to expect reasonable safety insofar as the clinic practices and environment are concerned.
- 5) **YOU HAVE THE RIGHT** to know the identity and professional status of individuals providing your service, and to know which physician or other practitioner is primarily responsible for your care. You have the right to refuse to participate in research projects or to be interviewed for such purposes. You have the right to a full explanation or purposes and uses of the information if you do participate.
- 6) **YOU HAVE THE RIGHT** to obtain from your physician complete and current information concerning your diagnosis, treatment and any known prognosis. When it is not medically advisable to give such information to you, the information can be made available to a legally authorized individual.
- 7) **YOU HAVE THE RIGHT** to reasonably informed participation in decisions involving your care. You should not be subjected to any procedure without your voluntary, competent, and understanding consent, or that of your legally authorized representative. Where medically significant alternatives for care or treatment exist, you should be so informed.
- 8) **YOU HAVE THE RIGHT** to consult with another specialist, at your own request and expense. You have the right to end your relationship with your healthcare provider.
- 9) **YOU HAVE THE RIGHT** to refuse treatment to the extent permitted by law. When refusal of treatment by you or your legally authorized representative prevents the provision of appropriate care in accordance with ethical and professional standards, your doctor may terminate the relationship with you upon reasonable notice.
- 10) **YOU HAVE THE RIGHT** to request and receive an itemized, detailed explanation of your total bill.



You Are Responsible...

- 1) **YOU ARE RESPONSIBLE** to provide, to the best of your knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other matters relating to your health. You are responsible for making it known whether you clearly comprehend a contemplated course of action and what is expected of you.
- 2) **YOU ARE RESPONSIBLE** for following the treatment plan recommended by your physician. This may include following the instructions of nurses and allied health personnel as they follow the orders of your physician.
- 3) **YOU ARE RESPONSIBLE** for keeping appointments, and when unable to do so for any reason, to notify the doctor's office.
- 4) **YOU ARE RESPONSIBLE** for your actions if you refuse treatment or do not follow the doctor's instructions.
- 5) **YOU ARE RESPONSIBLE** for assuring that the financial obligations of your health care are fulfilled as promptly as possible.
- 6) **YOU ARE RESPONSIBLE** for checking in at the reception desk upon each arrival so that the receptionist is aware of your presence.
- 7) **YOU ARE RESPONSIBLE** for informing the clinic about new addresses, new telephone numbers, changes of names, or new family members as soon as possible.
- 8) **YOU ARE RESPONSIBLE** for being considerate of the rights of other patients and clinic personnel and for being respectful of the property of other persons and that of the clinic.
- 9) **YOU ARE RESPONSIBLE** to provide a responsible adult to transport you home from the facility and remain with you for 24 hours if required by your provider.
- 10) **YOU ARE RESPONSIBLE** to inform your provider about any Advance Directive you may have that could affect your care.

You have the right to report any issues or concerns. The following numbers are provided for your information.

Springfield Clinic:
217.528.7541 Toll Free 800.444.7541

Medicare: 800.633.4227
Office of Civil Rights: 800.368.1019
Medicaid: 800.226.0768

Office of Medicare Beneficiary
Ombudsman website: www.cms.hhs.gov/Ombudsman/resources.asp

Complaints can be reported to:
Central Complaint Registry
525 W. Jefferson St. – Ground Floor
Springfield, IL 62761
800.252.4343 dph.ccr@illinois.gov