

## PATIENT RIGHTS & RESPONSIBILITIES

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*Oral & Facial Plastic Surgery believes that health care is a cooperative effort between you as the patient, your surgeon and our employees. Recognizing that the patients have rights, we have listed below the things you may expect and in turn your responsibilities while a patient and OFS.*

### **YOUR RIGHTS:**

1. You have the right to considerate and respectful care.
2. You have the right to obtain from your surgeon complete current information concerning your diagnosis, treatment, and prognosis in terms you can be reasonably expected to understand. When it is not advisable to give such information to you, the information should be made available to an appropriate person on your behalf. You have the right to know, by name, the surgeon responsible for coordinating your care.
3. Prior to the start of procedures and/or treatments that involve substantial risks, you have the right to receive from your surgeon the information necessary to give informed consent. You have the right to request and receive information concerning medical alternatives. You have the right to know the name of the person responsible for the procedures and/or treatment.
4. You have the right to refuse treatment and to be informed of the medical consequences of your action.
5. You have the right to pain assessment and appropriate management.
6. You have the right to every consideration of your privacy concerning your care program.
7. You have the right to expect that all communications and records pertaining to your care will be treated as confidential except as otherwise provided by law or contractual agreements.
8. You have the right to expect that OFS, within its capacity, will make a reasonable response to your request for services. When necessary, you may be referred to another provider, but only after you have received the all the information explaining the referral.
9. You have the right to change your care to another qualified provider. We request that you notify our office if you choose to change providers.
10. You have the right to execute an advanced directive. OFS requests that if you have executed an advanced directive that you bring that to our attention prior to scheduling a procedure
11. You have the right to obtain information as to any relationship between OFS and other health care and educational institutions in so far as your care is concerned. You have the right to obtain information as to the existence of any professional relationships among individuals, by name, which are treating you.
12. You have the right to be advised if human experimentation is involved in your care or treatment. You have the right to refuse to participate in any such projects.
13. You have the right to expect reasonable continuity of care. You have the right to expect your surgeon or a delegate of your surgeon to inform you of your continuing health care requirements following discharge.
14. You have the right to examine and receive an explanation of your bill regardless of source of payment, and you shall be informed of these services for which Medicare does not provide coverage.
15. You have the rights to know what OFS rules and regulations apply to your conduct as a patient.
16. It is OFS' goal and commitment to provide a safe and secure environment for all our patients, visitors and employees.
17. You have the right to receive credentialing information for the healthcare professionals at Oral and Facial Plastic Surgery. This information is available on our website, [www.omfacialsurgery.com](http://www.omfacialsurgery.com), or can be provided in hard copy, upon request.
18. Oral and Facial Plastic Surgery's surgeons and staff want to listen to patient suggestions, concerns and the concerns voiced by family members or visitors. It is our goal to review all suggestions and concerns and to provide a response that describes how the issue(s) were reviewed and actions that were taken to resolve. Patients who express a suggestions, concern or grievance, will not have their future access to care compromised in any way. Grievances may be submitted verbally or in writing.

To share a suggestions, concern or grievance, please contact any staff member or contact our business office at 402-390-0770 or by email at [info@omfacialsurgery.com](mailto:info@omfacialsurgery.com). If you feel your concern about safety or quality of care provided has not been adequately addressed you may contact our credentialing organization (AAAHC) at:

Accreditation Association for Ambulatory Health Care, Inc.  
5250 Old Orchard Road, Suite 200  
Skokie, IL 60077 1-847-853-6060 [www.aaahc.org](http://www.aaahc.org)

## **YOUR RESPONSIBILITIES:**

1. Your surgeon expects that you or your family will provide information about past illnesses, hospitalization, medications and other matters relating to your health history in order to effectively treat your illness.
2. OFS expects that you will cooperate with all personnel and ask questions if directions and/or procedures are not clearly understood.
3. You are expected to be considerate of other patients and personnel and to assist in the control of noise, smoking, and the number of your visitors. You are also expected to be respectful of the property of other persons and the property of OFS.
4. In order to facilitate your care and the efforts of your surgeon and OFS employees in their efforts to provide care, you are expected to follow their instructions and medical orders.
5. Duly authorized members of your family are expected to be available to OFS personnel for review of your treatment in the event you are unable to properly communicate with the surgeon or nurse.
6. It is understood that you assume the financial responsibility of paying for all services rendered whether through third party payers (your insurance company) or being personally responsible for payment for any services which are not covered by your insurance company.
7. It is expected that you will not take drugs which have not been administered by OFS employees and that you will not consume alcoholic beverages or toxic substances not allowed by your surgeon.
8. You are expected to observe all safety regulations that you have been made aware of by both verbal and other means.
9. You are fully responsible for reading, understanding and signing all OFS forms associated with your care, or for bringing with you a designated person who can assist you with reading and understanding these forms. You should ask questions about anything in the forms that you do not understand prior to signing them.



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