## **ENC Peds - Patient Rights and Responsibilities**

Our Practice is committed to providing quality health care. It is our pledge to provide this care with respect and dignity. In keeping with this pledge and commitment, we present the following Patient Rights and Responsibilities for you and/or your child.

### You have the right to:

- A personal clinician who will see you on an on-going, regular basis, at your expense.
- Competent, considerate, and respectful health care without discrimination due to race, ethnicity, national origin, ancestry, religion, language, physical or mental disability, socioeconomic status, gender, sexual orientation, gender identity/expression, marital status, age, culture, or source of payment.
- A second medical opinion from the clinician of your choice, at your expense.
- A complete, easily understandable explanation of your condition, treatment and chances for recovery.
- The personal review of your own medical records by appointment and in accordance with applicable State and Federal guidelines.
- Confidential management of communication and records pertaining to your medical care.
- Information about the medical consequences of exercising your right to refuse treatment.
- The information necessary to make an informed decision about any treatment or procedure, except as limited in an emergency situation.
- Be free from mental, physical, and sexual abuse.
- Humane treatment in the least restrictive manner appropriate for treatment needs.
- An individualized treatment plan.
- Have your pain evaluated and managed.
- Refuse to participate as a subject in research.
- An explanation of your medical bill regardless of your insurance and the opportunity to personally examine your bill.
- The expectation that we will take reasonable steps to overcome cultural or other communication barriers that may exist between you and the staff.
- The opportunity to file a complaint should a dispute arise regarding care, treatment, or service, or to select a different clinician at another facility.

#### You are responsible for:

- Knowing your health care clinician's name and title
- Giving your clinician correct and complete health history information, e.g. allergies, past and present illnesses, medications and hospitalizations.
- Providing staff with correct and complete name, address, telephone, and emergency contact information each time you see your clinician so we can reach you in the event of a schedule change or to give medical instructions.
- Providing staff with current and complete insurance information, including any secondary insurance, each time you see your clinician.

- Signing a "Release of Information" form when asked so your clinician can get medical records from other clinicians involved in your care.
- Telling your clinician about all prescription medication(s), alternative, i.e. herbal or other, therapies, or over-the-counter medications you take. If possible, bring the bottles to your appointment.
- Telling your clinician about any changes in your condition or reactions to medications or treatment.
- Asking your clinician questions when you do not understand your illness, treatment plan, or medication instructions.
- Following your clinician's advice. If you refuse treatment or refuse to follow instructions given by your health care clinician, you are responsible for any medical consequences.
- Keeping your appointments and arriving promptly. If you must cancel your appointment, please
  call the health center at least 24 hours in advance barring last minute emergencies with the
  expectation of communicating with the office as soon as reasonably possible to reschedule.
- Arriving later than halfway through your appointment time without prior communication to the
  office will count as a no show and you will not be able to be seen that day.
- Communicating with office when unexpected events occur as repeated failure to communicate for missed appointments will result in release of patient from our medical office.
- Paying copayments at the time of the visit or other bills upon receipt.
- Following the office's rules about patient conduct; for example, there is no smoking in our office.
- Respecting the rights and property of our staff and other persons in the office failure to do so will
  result in release of you from our medical office. For more information see our Expectations for
  Patients and Visitors Policy.

# **Rights of Adolescents**

- They have a right to privately meet with the provider and confidentiality starting at 14 years old.
   Permission from the adolescent to disclose with parents items discussed will be sought by provider. Unless they are a danger to themselves or others, items discussed will be held in confidence.
- They are allowed to consent to a physician licensed to practice medicine in North Carolina for medical health services for the prevention, diagnosis and treatment of following medical conditions without Caregiver knowledge. This includes services related to:
  - Sexually transmitted infection and other reportable diseases.
  - o Pregnancy.
  - Abuse of controlled substances or alcohol.
  - Mental health services.
  - Admission to a treatment facility upon their own written application in an emergency situation.
- Any minor who is emancipated may consent to any medical treatment, dental and health services for themself or for their child.

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#### ENC Peds - Patient Rights and Responsibilities Continued

By signing below, I affirm I understand the rights and responsibilities set forth above and will uphold
these responsibilities to the best of my abilities. I also accept the consequences for failing to uphold
these responsibilities. I understand and affirm that ENC Peds, PLLC is not responsible for my failure to
uphold any of these responsibilities.

Signature of Patient or Caregiver if under	18 yo.
Printed Name of Signer	
 Date	

## Adapted From:

- 1) American College of Physicians "Patients Rights and Responsibilities" template (<a href="http://www.acponline.org/practiceforms">http://www.acponline.org/practiceforms</a>)
- 2) Mayo Clinic Health System "Patients Rights and Responsibilities" (<a href="https://www.mayoclinic.org/documents/patient-rights-and-responsibilities-wi/doc-20533476">https://www.mayoclinic.org/documents/patient-rights-and-responsibilities-wi/doc-20533476</a>)
- 3) North Carolina General Statues Chapter 90, Article 1A Treatment of Minors.

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