

## PATIENTS RIGHTS AND RESPONSIBILITIES

Welcome to Advanced Cardiovascular Center, an outpatient cardiac catheterization facility that is committed to providing high quality cardiovascular diagnostics and treatments. The facility has licensed and board certified cardiologists on staff and is dedicated to providing the following services in a safe, compassionate, efficient and nondiscriminatory manner.

*Cardiac Catheterization*

*Peripheral Angiography*

*Peripheral Artery Angioplasty/Stenting & Atherectomy*

### At Advanced Cardiovascular Center, you have the right to:

1. Receive appropriate information concerning your diagnosis, treatment, and prognosis. When it is medically inadvisable to give such information to you as a patient, the information shall be provided to the person you designate or a legally authorized person.
2. Make decisions regarding the health care recommended by your health provider, except when not medically advisable. Accordingly, you may accept or refuse any recommended medical treatment, including participation in research.
3. Courtesy, respect, dignity, responsiveness, appropriate privacy, and timely attention to your needs, regardless of race, religion, ethnic or national origin, gender, age, sexual orientation, or disability. You have the right to an interpreter, if applicable. You have the right to know the names and roles of people treating you.
4. Confidentiality. Your health provider should not reveal confidential communications or information without your consent, unless provided for by law or by the need to protect the welfare of the individual or the public interest.
5. Continuity of health care. Your health provider should cooperate in the coordination of medically indicated care with other health providers treating you. The health provider may discontinue care provided they give you reasonable assistance and direction, and sufficient opportunity to make alternative arrangements. You have the right to change providers, and every effort will be made to accommodate your request by our staff, which may include rescheduling of procedures.
6. Information concerning: Services Available, Fees for Services, Payment Policies, and Provisions for After-Hours and Emergency Care.
7. To access, request amendment to, and to receive an accounting of disclosures regarding your health information as permitted under applicable law.

### At Advanced Cardiovascular Center, you have the responsibility to:

1. Provide accurate information to your health care provider about your health, including past illnesses, hospital stays, known allergies, and use of medicine. You have a responsibility to request clarification or more information about your treatment or instructions.
2. Cooperate with the treatment plan and comply with health provider instructions to ensure public and individual safety. You have a responsibility to disclose whether previously agreed-upon treatments are being followed and to indicate when they would like to reconsider the treatment plan.
3. Update/review your insurance information with us before the date of your procedure. If applicable you may be billed for any remaining balance not covered by your insurance.
4. Be considerate of the needs and property of other patients, staff, and the office, and conduct yourself in a quiet and orderly manner.

*Any comments, compliments or complaints may be directed to the Administrator of Advanced Cardiovascular Center at (314) 774-7235.*

I CERTIFY THAT I HAVE RECEIVED A COPY OF THESE PATIENT RIGHTS AND RESPONSIBILITIES:

\_\_\_\_\_  
Patient/Legal Representative Signature

\_\_\_\_\_  
Date

  
**Advanced Cardiovascular Center**

2335 Dougherty Ferry Rd. | Ste. A | St. Louis, MO 63122

Phone: (314) 774-7235

Fax: (314) 729-3960

PATIENT IDENTIFICATION