



PATIENT RIGHTS

The *patient* has the right:

1. To competent, considerate and respectful care in a safe and comfortable setting.
2. To be fully informed about treatment or procedure options as well as expected outcomes prior to treatment.
3. To accept or refuse care.
4. To personal privacy and the protection of private health care information.
5. To receive service(s) without regard to age, race, color, sexual orientation, religion, marital status, sex, disability, national origin or source of payment or sponsor.
6. To know of physician financial interest or ownership of the surgery center. (Stephen G. Phillips, MD, is the owner of our surgery center).
7. To have an Advance Directive. The patient also has the right to know that such Directive will not be followed during his or her surgical procedure.
8. To be free from mental, physical, sexual, or verbal abuse and to have the right to have any allegations investigated.
9. To voice grievances and express complaints about without fear of discrimination or reprisal.
10. To contact the following offices and agencies about the health care or treatment received or not received:

Sound Eye and Laser Administrator
1229 Madison Street, Suite 1250
Seattle, WA 98104
206-622-2020
Fax: 206-223-1963

Wash. State Dept. of Health HSQA Complaint Intake:
PO Box 47857
Olympia, WA 98504-7857
Phone: 360-236-4700
Toll Free: 800-633-6828
Fax: 360-236-2626
Email: HSQAComplaintIntake@doh.wa.gov

Office of the Medicare Beneficiary Ombudsman Website:
www.medicare.gov/Ombudsman/resources.asp

Medicare Help and Support: 1-800-MEDICARE