

# Gastroenterology Associates

*Gastroenterology and Hepatology*

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## PATIENT RIGHTS AND RESPONSIBILITIES

### **As a patient, you have the right to:**

- Be treated and cared for with dignity and respect.
- Be fully informed about a treatment or procedure and the expected outcome before it is performed.
- Confidentiality, privacy, safety, security, complaint resolution, spiritual care, and communication. If communication restrictions are necessary for patient care and safety, Gastroenterology Associates Endoscopy Center (GAEC) must document and explain the restrictions to the patient and family.
- Be protected from abuse, harassment and neglect and access protective services.
- Complain about your care and treatment and exercise all of your patient rights without fear of discrimination, reprisal, retribution or denial of care.
- Timely complaint resolution: Concerns may be reported to the GAEC Director of Endoscopy at 360.413.8671. Complaint investigations at GAEC involve the person reporting the concern in the resolution and are completed within 14 days. You may also contact the WA State Department of Health, Health Systems Quality Assurance (HSQA), Complaint Intake, at PO Box 47857, Olympia, WA 98504-7857; telephone: 360.236.4700 or toll free at 800.633.6828; fax: 360.236.2626. Or you may contact the Office of the Medicare Beneficiary Ombudsman at <http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html> or Medicare Help and Support: 1.800.MEDICARE.
- Be involved in all aspects of your care including refusing care and treatment and resolving problems with care decisions.
- Be informed of unanticipated outcomes in accordance with WA State law.
- Be informed and agree to your care.
- Have family input in care decisions, in compliance with your existing legal directives or existing court-issued legal orders.
- Information regarding after hours and emergency care: For issues related to your care at GAEC, contact 360.413.8250. If after hours and urgent, press the option to be connected with the answering service to reach the on-call physician. For emergency issues, please be seen at the nearest hospital emergency room.
- Information and forms regarding Advance Directives.
- Receive an explanation of your bill, regardless of the source of payment. Information about the estimated charges of your health services is available upon request.

### **As a patient, you have the responsibility to:**

- Provide accurate and complete information about your identity, your health care status including medications, past or present, your medical problems and provide accurate insurance information.
- Cooperate with your provider and their staff by following Gastroenterology Associates (GA) policies, procedures and instructions, by asking questions if something is unclear and by informing a staff member if you choose to refuse a particular treatment.
- Report changes in your condition or symptoms, including pain, to a member of your health care team.
- Act in a considerate and cooperative manner and respect the rights of others.
- Inform Gastroenterology Associates in advance if you must change or cancel your appointment.
- Pay for charges related to your care and if necessary, to make an arrangement with Gastroenterology Associates to meet your financial obligations.

Gastroenterology Associates Endoscopy Center is owned by the following GA physicians:

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