1. To expect to be treated with respect, consideration, and dignity and receive care in a safe environment.
2. To exercise your rights without being subjected to discrimination or reprisal.
3. To be free from all forms of abuse, neglect and harassment from ASC staff, visitors and other patients.
4. To be assured privacy of medical records is maintained and to be afforded the opportunity to approve or refuse the release of such information, except as otherwise permitted by law of third party payment contract and when release is required by law.
5. To be provided privacy and security of self and belongings during the delivery of patient care.
6. To know the name and function of anyone providing health care services for you.
7. To know names and professional relationships of other physicians who may care for you in the absence of your attending physician.
8. To be provided, to the degree known, with information concerning your diagnosis, treatment, and prognosis. When it is not medically advisable to give such information to you, the information will be made available to an appropriate person on your behalf.
9. To have the opportunity to participate in planning your medical treatment, receive information about proposed treatment or procedures in order to give informed consent, and make decisions involving your health care, including refusal to participate in experimental research.
10. To request a second opinion.
11. To expect a reasonable response to any reasonable request you may make for service.
12. To refuse treatment to the extent permitted by law and to be informed of the medical consequences of your action.
13. To expect communication in the language which you understand.
14. To expect treatment without regard to race, color, creed, religion, sex, national origin or source of payment, except for fiscal capability thereof.
15. To know services available, such as provisions for after hours or emergency care, educational material available, and policies concerning payment of fees.
16. To examine and receive an explanation of your bill, regardless of the source of payment.
17. To expect reasonable continuity of care and to know in advance the time and location of appointments.
18. To designate any area where you are cared for or treated as a non-smoking area.
19. To leave the procedure area even against the advice of your physician.
20. To have all patient rights apply to the person who may have legal responsibility to make decisions regarding medical care on your behalf.
21. To have your pain assessed and treated appropriately.
22. To know our policy on Advance Directives: MedStar Endoscopy Center at Lutherville acknowledges your right to have an Advance Directive and will add it to your medical record. However, in the unlikely event of deterioration during your surgery, it is our policy to stabilize you and transport you to the closest Medicare-participating, Joint Commission-accredited hospital with a copy of the Advance Directive if made available to us. More information regarding Advance Directives in Maryland is available at http://www.caringinfo.org/i4a/pages/index.cfm?pageid=3289.
23. To know that physicians who perform procedures at MedStar Endoscopy Center at Lutherville may have an ownership interest in the center. Patients are always free to choose any health care provider, subject to restrictions of their health insurance coverage. Please address any concerns about your referral to Linda Rosenthal, MD, Medical Director.
24. To know how to contact your state agency and/or Medicare to voice a concern or grievance regarding any aspect of your care.

The Joint Commission:
Office of Quality Monitoring
One Renaissance Boulevard
Oakbrook Terrace, IL 60181
Phone: (800) 994-6610
Fax: (630) 792-5636
complaint@jointcommission.org

State of Maryland:
Office of Health Care Quality
7120 Samuel Morse Drive
Columbia, MD 21046
410-402-8040
Or obtain a complaint form at:
http://dhmh.maryland.gov/ohcq/SitePages/Complaint%20Form.aspx

Medicare:
Medicare Ombudsman
1-800-633-4227