



STATEMENT OF PATIENT RIGHTS AND RESPONSIBILITIES

At Associated Medical Professionals, we seek to provide exceptional care and the best possible experience for our patients and their family. We wish to work with you to ensure you receive the clinical care, compassion, and services that you need. By understanding your rights and responsibilities, you can help us better serve you. You have the right consistent with the laws of New York State to:

1. Patients have the right to be treated with dignity at all times, with considerate, respectful care in a safe and clean environment.
2. Patients have the right to be protected from discrimination or reprisals if they exercise their rights. Discrimination is against the law.
3. Patients with disabilities or with language barriers have the right to effective communication including the use of an interpreter.
4. Patients have the right to be fully informed by his/her physician/provider about any treatment, procedure and expected outcomes prior to giving informed consent, to actively participate in decision including the right to refuse treatment as permitted by law.
5. Patients have the right to obtain from his/her diagnosis, treatment and prognosis in a way they can reasonably be expected to understand.
6. Patients have the right to be involved in decisions about their care, treatment and discharge plan.
7. Patients have the right to receive a written discharge plan post procedure when he/she has received anesthetic agents other than topical or local anesthesia.
8. Patients have the right to have their pain assessed, managed and treated as effectively as possible.
9. Patients have the right to personal privacy. The patient has the right to every consideration of his/her privacy regarding HIPAA.
10. Patients have the right to be informed of the name and position of the provider in charge of his/her care as well as any staff members involved in their care.
11. Patients have the right to expect that within its capacity this facility will provide evaluation, service and/or referral as indicated dependent on the urgency of the situation. When medically permissible, the patient may be transferred to another facility only after evaluation and explanation concerning the need for and alternatives to such transfer. Including provisions for after hours and emergency care.
12. Patients have the right, when appropriate, the family to be informed of unanticipated outcomes of care, treatment and services that are related to sentinel or adverse reviewable events.
13. Patients have the right to leave the facility, even if against medical advice.
14. We are committed to ensuring that our patients receive appropriate medical care. You can get information regarding your rights and how to report professional misconduct at: <https://www.health.ny.gov/professionals/doctors/conduct>. Patients have the right to file a grievance regarding their care without fear of reprisal either by contacting the AMP Compliance Officer at 100 Metropolitan Park Drive, Liverpool NY 13088 315-558-6622 or by contacting the NYS Department of Health, Office of Professional Medical Conduct Central Intake Unit Riverview Center 150 Broadway Suite 355 Albany, NY 12204-2719 1-800-663-6114.
15. Patients have the right to change their choice of physician.
16. Patients have the right to dispute information in their medical record.
17. Patients have the right to refuse to take part in research. In deciding whether to participate, you have the right to a full explanation.
18. Patients have the right to expect ethical billing practices, to request the fees for their services, and to examine and/or receive an explanation of his/her bill.
19. Information about Associated Medical Professionals, their providers, services and affiliates is posted at www.ampofny.com.

To help us provide you with high-quality care, you are responsible for:

1. The patient is responsible for providing accurate and complete information concerning your health including present complaints, current medications including prescription and over the counter medications, past medical and surgical histories, hospitalization, allergies and sensitivities, health care directives.
2. The patient is responsible for asking questions if you do not understand your treatment plan and your role in that plan.
3. The patient is responsible for following the treatment plan established by your physician/provider including instructions given by members of the medical or office-based surgery staff as they carry out provider orders. Patients/caregivers are responsible for outcomes if they do not or refuse to follow the plan of care.
4. The patient is responsible for consideration of the rights and respect of other patients, property and staff of AMP.
5. The patient, when appropriate the family is responsible for assuring the financial obligations is fulfilled in a timely fashion.
6. The patient is responsible for compliance with smoke free environment.
7. The patient is responsible to provide a responsible adult for transportation and to observe the patient in the post discharge period for a period of 12-24 hours; depending on the procedure and anesthesia used per your discharge instructions.

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