



Physicians and staff at Tri-State Orthopaedic Surgeons, Inc. take your health and wellbeing very seriously. Ongoing collaboration with your physician allows you to take an active role in your own health care and treatment. Please read about patient rights and responsibilities to ensure you receive the safest and most effective health care.

Patient Rights

1. You have the right to receive adequate, appropriate and compassionate care.
2. You have the right to be free from mental, physical, sexual and verbal abuse, neglect and exploitation.
3. You will not be discriminated against on the basis of your race, color, religion, sex, sexual orientation, age, mental or physical disability, genetic information, veteran status, national origin, gender identity and/or expression, socioeconomic status or source of payment or any other characteristic protected by federal, state, or local law.
4. You have the right to know who is caring for you, what their qualifications and what role they play in your care.
5. You have the right to receive information about your condition in terms you can understand, as well as the proposed course of treatment.
6. You have the right to request and receive language interpreting and translation services. Patients with vision, speech, hearing or cognitive impairments have the right to receive information from their provider in a manner that meets their needs.
7. You have the right to designate a representative to make healthcare decisions on your behalf.
8. You or your designated representative have the right to participate in the consideration of ethical issues surrounding your care.
9. You have the right to refuse treatment to the extent provided by law and to be informed of the medical consequences of that refusal. If you refuse care or treatment, you are responsible for the results of that decision.

10. If your physician or their staff decides that your refusal of treatment prevents you from receiving appropriate care according to ethical and professional standards, the relationship with you may be terminated upon reasonable notice.
11. You have the right to privacy. Communication and records about your care will be treated confidentially.
12. You have the right to authorize in writing who may receive copies of your medical record, except as required by law.
13. You have the right to have a family member, friend or other individual be present during your visit to our office.
14. You have the right to receive an explanation of charges on your statement except where prohibited by law.

Patient Responsibilities

1. Provide an accurate and complete health history including, present complaints, past illnesses, allergies, hospitalizations, medications, previous surgeries and other matters related to your health.
2. Be truthful and forthcoming with your physician and strive to express your concerns clearly.
3. Following the treatment plan established by your physician, including the instructions of other health professionals as they carry out the physician's orders.
4. Ensure you clearly comprehend the course of your medical treatment and what is expected of you.
5. Keep your appointments and notify our office when you are unable to do so.
6. Understand the consequences and potential outcomes if you do not follow the treatment plan established by your physician.
7. Plan for responsible transportation when discharged after procedural sedation is administered and when advised by your physician.

8. Provide accurate health insurance information and understand your financial responsibilities. Ensure financial obligations are promptly satisfied.
9. Recognize that a healthy lifestyle can often prevent or mitigate illness and take responsibility to follow preventive measures and adopt health-enhancing behaviors.
10. Contribute to a safe environment of care. Be aware of and refrain from behavior that unreasonably places the health of others at risk. Treat other patients, visitors and staff with respect and consideration.

Our obligation to provide a safe environment for patient care may override the patient's right to privacy.

If you believe that you have been mistreated, denied services or discriminated against in any aspect of services because of a handicap, you may file a grievance. A written response will be provided upon request.

Attn: Compliance Coordinator
225 Crosslake Dr.
Evansville, IN 47715
(812)477-1558

You should also be aware that you can file a complaint directly with the Indiana State Department of Health by calling [\(800\)246-8909](tel:8002468909) or emailing complaints@isdh.in.gov.