

Midwest Fertility Specialists

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Patient Rights and Responsibilities

It is the policy of Midwest Fertility Specialists to preserve the rights and responsibilities of every patient and adhere to the guidelines as defined herein. This policy does not presume to be all inclusive of incidents related to patient's rights and responsibilities. It is intended to express the Practice's commitment to maintain a professional relationship and to emphasize the need to observe the rights and responsibilities of the patient.

PROCEDURES

These rights and responsibilities are published and communicated to all patients:

PRINCIPLES OF PATIENT'S RIGHTS

1. All patients are treated with respect, consideration and dignity.
2. All patients are provided appropriate privacy.
3. All patient disclosures and records are treated confidentially, and, except when required by law, all patients are given the opportunity to approve or refuse their release.
4. All patients are provided, to the degree known, complete information concerning their diagnosis, evaluation, treatment, and prognosis.
5. All patients are given the opportunity to participate in decisions involving their health care.
6. All patients have the right to refuse participation in clinical trials that may be offered from time to time.
7. All patients have the right to complete and easily understood information about the cost of treatment options, options for payment, and the role of insurance as MFS knows it.
8. All patients have the right to change providers, within MFS, one time.
9. All patients have the right to complain or voice concern about service, care, and staff interactions, etc to the Practice Administrator (John Kolodzej), with no fear of repercussions.
10. Patients have the right to know that MFS includes the Andrology and Endocrine Lab, IVF Lab, procedure suite, and the Practice itself.

PRINCIPLES OF PATIENT'S RESPONSIBILITIES

1. Provide complete and accurate information about your medical history and current condition, medications, (including over-the-counter products and dietary supplements) and any allergies or sensitivities.
2. Provide complete and accurate demographic and insurance information.
3. Follow the agreed upon treatment plan as prescribed by the physician and participate in own care.
4. Provide a responsible adult for transport home from our facility if that is required.
5. Inform MFS about any legal documents (wills, marriage, divorce, power-of-attorney, etc) that could impact care.
6. Accept personal financial responsibility for any charges not covered by insurance.
7. Be respectful of all professionals and staff, as well as other patients.

If a patient wishes to talk with someone directly regarding the care/service received at Midwest Fertility, please contact Chris Wayne, Practice Administrator, at (317) 571-1637 or by e-mail at cwayne@ivfmidwest.com; or you may contact AAAHC by phone at (847) 853-6060 or by mail at 5250 Old Orchard Road, Suite 200, Skokie, IL 60077; or The Joint Commission by phone at (800) 994-6610 or by e-mail at complaint@jointcommission.org or by mail at Office of Quality Monitoring; The Joint Commission; One Renaissance Boulevard; Oakbrook Terrace, IL 60181; or the Indiana State Department of Health by phone at (800) 246-8909 or by e-mail at complaints@isdh.in.gov or by mail at The Indiana State Department of Health; Division of Long Term Care; 2 North Meridian #4B; Indianapolis, IN 46204. Please be assured that there can be no repercussions/retaliation from Midwest Fertility Specialists for contacting any of the above with concerns or complaints.

(Printed)

(Signature)

(Date)