

**This notice describes the rights you have as a patient in our practice. Please review them carefully.**

### PATIENTS HAVE

#### **A RIGHT TO:**

- Be treated with dignity, respect, and consideration
- Not be subjected to abuse, neglect, exploitation, coercion, manipulation, sexual abuse or assault, restraint or seclusion (subject to R9-10-1012(B)), retaliation for submitting a complaint to the Department or another entity, or misappropriation of personal and private property by an outpatient treatment center's personnel member, employee, volunteer, or student
- Not be discriminated against based on race, national origin, religion, gender, sexual orientation, age, disability, marital status, or diagnosis
- Receive treatment that supports and respects the patient's individuality, choices, strengths, and abilities
- Receive privacy in treatment and care for personal needs
- Review, upon written request, the patient's own medical record
- Receive a referral if the outpatient treatment center is not authorized or able to provide certain health services needed by the patient
- Participate or have the patient's representative participate in the decisions concerning treatment
- Refuse treatment to the extent allowed by law
- Receive assistance by the patient's representative or other individual in understanding, protecting, or exercising the patient's rights

### ADMINISTRATORS

#### **SHALL ENSURE THAT:**

- A patient or the patient's representative either consents to or refuses treatment, except in an emergency
- A patient or the patient's representative may refuse or withdraw consent before treatment is initiated
- A patient is informed of alternatives to a proposed psychotropic medication or surgical procedure and associated risks and possible complications of a proposed psychotropic medication or surgical procedure, except in emergencies
- A patient or the patient's representative is informed of the outpatient treatment center's policy on health care directives and the patient complaint process
- A patient consents to a photograph before taken, except that a patient may be photographed when admitted to an outpatient treatment center for identification and administrative purposes
- A patient provides written consent to release information in the patient's medical record or financial records, except as otherwise permitted by law

PATIENT  
**RESPONSIBILITIES**

- Providing us with honest, complete information about matters that relate to your care
- Showing respect and consideration for the rights of fellow patients, our staff and our property
- Complying with the rules of our facility, including our visitor and smoke-free environment policies

PATIENT COMMENT  
**OR COMPLAINT PROCESS**

- Ask to speak with the center's Site Manager
- Any patient or patient's representative has to right to report any concerns to:

**Arizona Department of Health Services**

*Medical Facilities Licensing*  
150 N. 18th Avenue, Ste. 450  
Phoenix, AZ 85007  
(602) 364-3030