**The RINJ Foundation Clinics’ Patient Services**

Below outlined the clinic’s commitment and responsibilities to patients, with the hope that observing them would contribute to a more effective patient care, and greater satisfaction for the patients, the doctors and the clinic as well.

1. The clinic is committed to provide patients a considerate and respectful care regardless of race, religion, national origin, socio-economic status, gender or sexual orientation.

2. The patient must be given suitable information concerning the procedure/s he/she is interested in, including the health risks involved, and any alternatives for the procedure, in a way the patient can understand. Patient must be informed with the name of the doctor/service provider responsible for coordinating the care.

3. The patient has the right to refuse treatment to the extent permitted by law and to be informed of the consequences of such an action.

4. The clinic is responsible for protecting the patient’s privacy; case discussion consultation, examination, procedure/treatment are confidential and should be conducted discretely.

5. The clinic should not release any information to any individual or office/establishment pertaining to the patient’s record without a written consent from the patient.

6.  The clinic must make reasonable response to patient’s request for services. When necessary (i.e. the doctor is away) depending on the urgency of the case, the clinic may refer patient to go to the nearest hospital. When this occurs, the clinic should be ready to release patient’s information upon his/her consent.

7. The clinic is responsible to give reminder to patients about their appointments either by telephone or email indicating the date and time of the appointments. Furthermore, patients must be informed or reminded about any pre-operative or pre-treatment preparations.

8. The patient must be informed of the total cost of the procedure/treatment, and get explanation of the bill (if required) prior to the provision of services.

9. Should the patient requires other opinion from practitioner outside the clinic, the clinic should give its’ full cooperation in providing any information that was obtained after the release form has been signed by the patient.

10.  The clinic is committed to assist patients on their decision-making process, by answering patient’s further inquiries and giving sensible advice or suggestions when asked.

**Statement of Patient’s Responsibilities**

1. The patient has the responsibility to provide the following information to the clinic, to the best of his/her ability:

\* Contact information – name, address, telephone numbers, and email address, date of birth, height and weight.

\* Accurate information about present concerns, past conditions, medications, and other matters pertinent to his/her health.

2. The patient has the responsibility to understand and follow the procedure/treatment recommended by the doctor/provider or to ask questions and discuss concerns when he/she does not understand or agree with the procedure/treatment.

3. The patient has the responsibility to keep appointments reliably and promptly or to notify the clinic when unable to do so.

\* For surgical procedure - 5 days notice (to avoid cancellation fee\*)

\* For other treatments - 24 hours notice (to avoid redemptions on package deals)

**Minor and Dependent Patient**

Minor patient under the age of eighteen (18), or developmentally challenged/dependent patient will only be assessed by the doctor/service provider with a parent, or guardian present at the visit. In the alternative, as in the case of an emergency, the peer review process is in full force and the patient will be attended by two medical personnel at all times.

**Releasing Patient Prescription**

The prescription must be signed by the attending doctor or nurse practitioner, and has to be copied as part of the record before releasing it to the patient. If patient consented, the prescription can be given to the person accompanying her/him, so it can be filled from the pharmacy before she/he is discharge to go home.

**Patient Complaint Procedure**

All possible care will be taken to see that each patient has a satisfactory experience at the clinic. If a patient expresses dissatisfaction with any service,

\* Empathy will be shown reflecting our concern that the patient is dissatisfied.

\* The patient will be referred to the doctor/service provided originally involved for more specific management.

\* If the complaint was incapable of resolution, the patient will be referred to the Clinic Director for final disposition of the case.

If a patient has a complaint regarding non-clinic related problems, such as safety, he/she will be referred to the clinic's Manager.

**Termination of Care**

When patients are abusive, disruptive, or pose a threat to others, the clinic may terminate care to such patients. Termination will be determined by the attending doctor/provider involved and the Clinic Director.

If immediate action is required, the assessment may be interrupted and the patient may be instructed to leave the clinic. If staff anticipates a violent reaction, notify the Police at (insert local police number) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to request a standby officer before instructing the patient to leave. The event shall be recorded into the patient’s record.

A certified termination letter (marked confidential) will be sent informing the patient that he or she will not be scheduled for further procedure or treatment. Termination letter must be reviewed by the Clinic's Manager and approved by the Medical Director.

**No Show Policy For Pre-Booked Appointments**

Such patients will be put on a "stand-by" status, and will be accommodated as soon as possible.

**Patient Billing, Accounts Receivable, and Cash Handling Responsibilities**

**Billing**

Most services that the clinic offers are free.  Refer to the CLinic Manager any cases of products or services that require extra billing.

**Medical Records and Record Keeping**

The medical record is a legal document that is the property of the clinic, and should never be given to anyone outside, unless formally directed to do so by proper legal process.

**Confidentiality of Patient Medical Records**

Patient medical records contain confidential information. It is imperative that confidentiality be maintained in order to assure an ethical and legal patient care system.

The patient has the control with the release of confidential records about his/her procedure/treatment, and/or condition.  In order for the clinic to furnish the record to the third party, the patient must request a copy of the record in writing.  He/she may authorize release of information by signing a Release Copy of Medical Record form, which is available at the reception desk. The authorization must be examined to ensure that the signature is authentic and is signed by a patient who is in legal age or by his/her guardian.

Service providers or any other staff member who removed records from the clinic are subject to suspension or dismissal.

Failure to maintain confidentiality can have serious implications for patients and can jeopardize the clinic's legal position.

**Patient Record Keeping**
The patient medical record must include all the information about the patient; all advice and recommendation about the procedure/treatments, instructions, procedure/treatment(s) rendered, follow-up visits and care provided to the patient must be documented in his/her medical record.  Necessary history, relevant information and what was truly observed must be recorded. It is mandatory that all records include complete documentation, dated and signed by the doctor/service provider, including all types of communication with the patient.

Patient records are kept in reverse chronological order, with the most recent paperwork on top.

Medical records should be returned to the designated areas by the end of the day, and should be kept securely at all times.