Advance Directive Information

The advance directive is a simple way to put your wishes about health care decisions in writing. It is a document in which you give instructions about your health care and what you want done or not done if you cannot speak for yourself. This document helps guide families and medical personnel in deciding the course of medical treatment to delay death. It usually spells out how aggressive medical treatment should be administered.

In Oregon, the Health Care Decision Act (ORS 127.505-127.995) allows an individual to name a person to direct your health care when you cannot do so. This person is called your “health care representative”. Your representative must agree to serve in this role and must sign the necessary forms.

The following are included within the advance directive:
- Living will
- Medical power of attorney
- Pre-hospital medical care directive

For further information on Advance Directives or downloadable forms:
- [https://www.oregon.gov/DCBS/shiba/topics/Pages/advancedirectives.aspx](https://www.oregon.gov/DCBS/shiba/topics/Pages/advancedirectives.aspx)
- Oregon Health Decisions at 1-800-422-4805

Completing an advance directive is completely voluntary. If you do not want an advance directive you do not need to complete the forms.

The Oregon Clinic’s Advanced Directive Policy

Life-sustaining efforts will be initiated and maintained on all patients who may have a cardiac/respiratory event while at the Endoscopy Center. Patients will be given the opportunity to be referred to another facility for their care if not in agreement with this statement of limitation. If available, copies of any advanced directives will accompany the patient being transferred to another facility.

PHYSICIAN DISCLOSURE

As required by Federal Medicare regulations we are required to disclose that our physicians have a financial interest in The Oregon Clinic’s Gastroenterology Endoscopy Centers.

NOTICE OF REFERRAL RIGHTS AND ACKNOWLEDGMENT

In accordance with Oregon law (ORS 441.098), when you are referred for care outside of our clinic, we are required to notify you that you may have the test or service done at a facility other than the one recommended by your physician or health care provider.
**THE OREGON CLINIC**
**PATIENT RIGHTS AND RESPONSIBILITIES**

The “patient” refers to the patient, patient’s representative or surrogate, if applicable.

**As a patient of The Oregon Clinic you have the Right to:**

- Receive all communications, whether verbal or written, in a language and manner that you understand. Interpreters will be provided when necessary.
- Considerate, respectful and compassionate care in a safe and secure environment that is free of all forms of discrimination, abuse or harassment.
- The ability to exercise your rights without being subjected to discrimination or reprisal.
- The right to personal privacy and confidentiality concerning your medical care. Information can only be released with your consent, except as provided by law. You have the right to be advised as to the reason for the presence of any individual. HIPAA regulations will be observed.
- Receive information about your diagnosis, treatment, and expected result from your provider or designated staff in terms that you can understand. When it is medically inadvisable to give such information to a patient, the information is provided to a person designated by the patient or to a legally authorized person.
- To receive the necessary information and participate in decisions regarding a procedure or proposed treatment in order to give informed consent or to refuse this course of treatment.
- Reasonable continuity of care and to know, in advance, the time and location of appointment(s), as well as the practitioner providing the care.
- Consult with another physician or change providers if other qualified providers are available.
- Agree to or refuse to participate in research projects.
- Know the name and the professional status of the provider who has primary responsibility for coordination of your care and the names, professional relationships and credentials of other practitioners and health care workers you may see.
- Within the confines of the law, review your medical records. All communications and records pertaining to your care will be treated as confidential.
- Receive information, in advance of the procedure, concerning the Endoscopy Center’s policy on advance directives, including a description of applicable State Health and Safety Laws, and if requested, official State advance directive forms. These are available on request.
- Have in effect and documented on your medical record the presence of any Advance Directives concerning Living wills, medical powers of attorney or other documents that limit your care, and you have the right to be referred to an alternate facility if you wish to have your Advance Directives honored during your procedure. For further information visit [www.oregon.gov/DCBS/SHIBA/advanced_directives.shtml](http://www.oregon.gov/DCBS/SHIBA/advanced_directives.shtml)
- Provide appropriate feedback, including suggestions and complaints.
- Voice grievances, verbally or written, regarding treatment or care that is, or fails to be, furnished. For assistance in expressing grievances or complaints verbally or in writing to The Oregon Clinic:
  - Visit [www.oregonclinic.com/contactus](http://www.oregonclinic.com/contactus) and choose “Patient Relations”.
  - Call Patient Relations at 503-963-2843
  - Call the care specialist office directly and speak with the Director of Operations or call the main information line at 503-935-8000
  - Medicare Patients may visit [www.cms.hhs.gov/center/ombudsman.asp](http://www.cms.hhs.gov/center/ombudsman.asp) or 1-800-MEDICARE, [www.healthoregon.org/hrqi](http://www.healthoregon.org/hrqi). Oregon Health Authority, Health Facility Licensing and Certification, PO Box 14260, Portland, OR 97293-2060, 971-673-0540.
- Examine and receive an explanation of your bill and our payment policies, regardless of the source of payment.
- After-hours access to physician owners via phone. Emergency measures are available as needed.

**As a patient of The Oregon Clinic, you have the Responsibility to:**
- Provide complete and accurate information about your health including present condition, past illnesses, hospitalizations, medications, including over-the-counter products and supplements, allergies and sensitivities, and any other information that pertains to your health.
- Be an active participant in your care.
- Make it known whether you clearly comprehend a contemplated course of action and what is expected of you, including if you anticipate not following the prescribed treatment or are considering alternative therapies. Ask questions when you do not understand.
- Follow the treatment plan recommended by your practitioner, which may include the instructions of nurses and allied health personnel as they carry out the coordinated plan of care and implement the responsible practitioner’s orders, and as they enforce the applicable rules and regulations.
- Report unexpected changes in your condition to the responsible practitioner.
- Accept the responsibility for your actions if you refuse treatment or do not follow the practitioner’s instructions.
- Provide complete and accurate billing information for claim processing and to pay bills in a timely manner.
- Keep appointments, be on time for your appointments and notify your physician as soon as possible if you cannot keep your appointments.
- Be respectful of others and their property while in The Oregon Clinic facilities. Assist in the control of the noise, smoking, and the number of visitors. Failure to comply with this may lead to termination from the practice.
BILLING INFORMATION

You will receive statements from various medical service providers for your procedure. If you require assistance, or have any questions regarding your billing, please use the table below to determine who is best able to answer your questions. Thank you for allowing us to provide your GI care.

<table>
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<tr>
<th>SERVICES PROVIDED</th>
<th>Gastroenterology – East Locations: Gateway, Milwaukie and Vancouver, WA</th>
<th>Gastroenterology – West Location: Peterkort Building</th>
<th>Gastroenterology – South Locations: Tualatin, Oregon City and Newberg</th>
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<tr>
<td>Professional Fees: covers the GI physician professional services. Office Visits and Procedures</td>
<td>The Oregon Clinic Business Office Phone (503) 963-2900 Hours: M-F; 8:00am to 4:30pm</td>
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<td>Endoscopy Center Fees: covers facility usage, equipment, nursing care and medical supplies.</td>
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<td>Histology Fees: covers the cost of processing the specimen after a procedure.</td>
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| Pathology Fees: covers the cost of the Pathologist who reads and interprets the specimen slide. | Providence Pathology Phone: (503) 215-4300 Hours: M-F; 8:00am to 8:00pm; Sat: 9:00am to 2:00pm | Miraca/Cohen/Metroplex Pathology Phone: (888) 344-1160 Hours: M-F; 8:00am to 5:00pm CST |
| Pathology Fees: covers the cost of the Pathologist who reads and interprets the specimen slide. | Legacy Labs Phone: (503) 413-4420 Hours: M-F; 8:00am to 4:30pm Quest: Please see statement for Billing Info. | Miraca/Cohen/Metroplex Pathology Phone: (888) 344-1160 Hours: M-F; 8:00am to 5:00pm CST |
| Pathology Fees: covers the cost of the Pathologist who reads and interprets the specimen slide. | Innovative Anesthesia (Practice Management Group-Billing Company) Phone: (888) 819-7818 Hours: M-F; 8:30am to 7:30pm EST | Innovative Anesthesia (Practice Management Group-Billing Company) Phone: (888) 819-7818 Hours: M-F; 8:30am to 7:30pm EST |
| Pathology Fees: covers the cost of the Pathologist who reads and interprets the specimen slide. | Anesthesia Associates NW (Anesthesia Business Consultants-Billing Company) Phone: (877) 222-4217 or (925) 949-2302 Hours: M-F; 7:00am to 3:00pm PST | Anesthesia Associates NW (Anesthesia Business Consultants-Billing Company) Phone: (877) 222-4217 or (925) 949-2302 Hours: M-F; 7:00am to 3:00pm PST |

If your procedure was done at a hospital, please contact the hospital for ALL charges (professional, facility, anesthesiology and pathology fees).

| Any Providence Hospital | Providence Health and Services Business Office Phone: (503) 215-4300 Hours: M-F; 8:00am to 8:00pm, Saturday 9:00am to 2:00pm |
| Any Legacy Hospital | Legacy Health System Business Office Phone: (503) 413-4048 Hours: M-F; 8:00am to 6:45pm |