



Patient Bill of Rights

You Have the Right...

- Not to be denied participation in all treatment services based on the grounds of race, color, creed, sex, sexual orientation, national origin, disability, diagnosis, religion, age or socioeconomic status.
- To considerate and respectful care.
- To reasonably expect, from staff members responsible for your care and welfare, complete and current information concerning your condition.
- To know by name and position the staff members responsible for your care.
- To reasonable consideration of your privacy and to be treated with respect and full recognition of your dignity, individuality, and reasonable cultural needs.
- To expect a reasonable response to your requests.
- To be free from all forms of abuse or harassment, neglect, or exploitation.
- To be reasonably informed at the time of check out of medical and/or ancillary services charges.
- To be afforded the opportunity to participate in planning and implementing your treatment program, to refuse care, treatment or services in accordance with law and regulation.
- To the maintenance of confidentiality of your clinical record.
- To access information contained within your medical record.
- To be informed, when appropriate, about the outcomes of care, including anticipated outcomes.

You Have the Responsibility...

- To be honest about matters that relate to you as a patient.
- To provide staff with accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other matters pertaining to your health.
- To report any perceived risks in our care.
- To report any unexpected changes in your condition to those responsible for your care and welfare.
- To follow the care, services or treatment plan developed.
- To ask any questions when you do not understand or have concerns about your plan of care.
- To understand the consequences of the treatment alternatives and not following your plan of care.
- To know the staff who are caring for you.
- To be considerate and respectful of the rights of both fellow patients and staff.
- To honor the confidentiality and privacy of other patients.
- To be considerate of the property of Pacific Pain Management.
- To assure the financial obligations of your healthcare are fulfilled as promptly as possible.

How to file a Complaint or Complement

Verbal complaints or complements can be made by calling the main number at 503-654-5636 and asking for the Clinic Administrator or asking in person for the Clinic Administrator while on the premise. Written correspondence addressed to Clinic Administrator will be handled in the same manner. All complaints will be dealt with in a timely manner. In the event that a complaint is not resolved to the satisfaction of the patient or their representative, they may also contact the Clinic Directors. For more contact information, please visit our website at www.pacificpainpdx.com

(503) 654-5636 phone • (503) 654-5638 fax

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