

**WHAT WE ARE:** We are an outpatient surgical and procedural facility licensed in the State of Utah.

**WHO WE ARE:** We are wholly or partially owned by physicians who desire to provide a safe and comfortable medical facility that would provide efficient and effective services to patients.

**YOUR RIGHTS AS A PATIENT:**

You have the right to choose the provider and the facility for your health care
services. You will not be treated differently by your physician if you obtain health care services at another facility.

**YOUR CHOICE:** Your physician may have ownership interest in this facility. You have the right to know this, so if you want to know, please ask. Please discuss with your surgeon your

questions or concerns if you may want to have your procedure at an alternative health care facility.

**CREDENTIALS:** All of the physicians and anesthetists have been credentialed according to regulations

and standards. Information is available upon request.

**PATIENT**
**GRIEVANCE:**

**ADVANCE**
**DIRECTIVES:**

If patients have complaints or concerns in regard to care at our facility, they are encouraged to let the manager know. If further review is indicated, patients are urged to fill out a grievance form, which is available upon request at the front desk. Contact information for the Facility manager, for the State and for Medicare are available below.

If you have an advance directive or living will and a medical emergency arises, a surgery center will transfer you to the closest hospital. A surgery center will provide emergency care to stabilize the patient for transfer to a higher level of care. Please discuss with your physician if you have questions, or to have your procedure performed at a facility that will follow your advance directive for do not resuscitate.

A hospital will make decisions about following any advance directive or living will or a request to not resuscitate should your heart stop or if you should stop breathing. You have a right to have your living will or advance directive information present in

our medical record and to be informed of the facility’s policy prior to the procedure.

State information and forms to prepare an advance directive or living will if you decide to have one, can be found at the following web site:

<https://eforms.com/advance-directive/ut>

**Please let us know if you have a complaint or concern by asking for the Administrator.**

Complaints can also be made at state and federal offices:

Utah Department of Health, Bureau of Health Facilities and Licensing and Certifications

PO Box 144103

Salt Lake City, UT 84114

Phone: (800) 662-4157

**For Medicare** Office of the Medicare Ombudsman at [http://www.medicare.gov/claims-and-appeals/medicare-rights](http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html)