NOTICE OF PATIENT RIGHTS

The providers at MinuteClinic[®] are committed to providing quality health care and maintaining the rights and dignity of our patients.

As a Patient, You Have the Right:

- **1.** To freedom of choice in your selection of facility, provider or health service mode.
- 2. To receive an itemized copy of your bill (regardless of source of payment) and to have a copy of the bill sent to your provider.
- **3.** To know the name and specialty (if any) of the nurse practitioner or other providers responsible for your care.
- **4.** To information regarding your diagnosis, evaluation and treatments, including medications prescribed for you, in terms you can understand.
- **5.** To confidentiality of records and communications to the extent provided by law.
- **6.** To have all reasonable requests responded to promptly and adequately within the capacity of MinuteClinic.
- 7. To know the relationship that MinuteClinic has with any other health care facility to the extent the relationship relates to your care or treatment.
- 8. To obtain a copy of any MinuteClinic rules or regulations that apply to your conduct as a patient.
- **9.** To obtain any available information regarding financial assistance or free care.
- **10.** To review and obtain a copy of your medical record upon request. There may be a small charge per page for copying.

- **11.** To refuse to be examined by a student or to ask that a provider not be assigned to your care.
- 12. To refuse to serve as a research subject or to receive care when the primary purpose is educational.
- **13.** To privacy during medical treatment within the capacity of MinuteClinic.
- **14.** To prompt, lifesaving treatment in an emergency within the capacity of MinuteClinic without discrimination regarding economic status or source of payment.
- **15.** To informed consent to the extent provided by law.
- **16.** To prompt and safe transfer to another facility if you cannot be treated at MinuteClinic.
- **17.** To be treated with dignity and respect in accordance with your cultural, psychological, spiritual and personal values, beliefs and preferences.
- **18.** To be informed of the procedure for submitting a complaint about MinuteClinic and/or the quality of care you have received, and to receive a response to your complaint in a timely manner.
- **19.** To refuse treatment to the extent provided by law and to be informed of the risks of your decision to refuse treatment.
- **20.** To access referral information for conditions that MinuteClinic does not treat.

As a Patient, You Have the Responsibility:

- **1.** To know the benefits and exclusions of your health plan coverage.
- 2. To respect the rights, property and show consideration for the property and environment of all MinuteClinic health care providers and patients.
- **3.** To provide MinuteClinic with complete and accurate information about all present and past health matters.
- **4.** To understand and comply with the treatment plan agreed upon by you and your nurse practitioner.
- **5.** To follow instructions concerning your treatment and to ask questions if you do not understand or need an explanation of your diagnosis or plan of care.
- 6. To accept responsibility for consequences following a decision to refuse treatment or instructions.
- **7.** To pay all applicable copayments at the time of service.
- **8.** To express your opinions or complaints in a constructive manner to the appropriate people.

For contact information in your state regarding your rights as a patient, you may ask your MinuteClinic practitioner, call 1.866.389.ASAP (2727) or visit minuteclinic.com