

PATIENT'S RIGHTS AND RESPONSIBILITIES

At PIWH, we wish to foster an environment of compassion, understanding and respect. We understand that each person faces unique challenges every day.

In order to provide a safe and healthy environment for staff, visitors, patients and their families, PIWH expects visitors, patients and accompanying family members to refrain from unacceptable behaviors that are disruptive or pose a threat to the rights or safety of other patients and staff.

As a patient visiting our practice, please consider the following:

- If you have any questions about the care or are unhappy with the service received in our office, please request to speak to a manager before you leave our office so that any clarifications about your care or the services you received can be addressed.
- Communicate all issues that you wish to discuss with the doctor at the time your appointment is scheduled so that an appropriate amount of time can be allotted. If you do not do this in advance, another visit may be necessary so that the doctor can give all patients the time and quality of care they deserve.
- Let our staff know when you do not understand the treatment or what is expected of you.
- Questions about your financial obligations to the practice can be answered by contacting our Insurance Department at 717-737-4511 and pressing Option 5.
- Our practice follows a zero-tolerance policy for aggressive behavior directed by patients against our staff.
- Abide by any practice or public health and safety policies or regulations, such as not smoking or wearing a mask.
- Be courteous with the use of your cell phone and other electronic devices. When interacting with any of our staff, please put your devices away unless agreed upon by you and the provider to necessitate care.
- Supervise any underage children accompanying you.

The following behaviors are prohibited and may be grounds for dismissal from the practice.

- Possessing firearms or any weapon.
- Intimidating, harassing, physically assaulting, or threatening staff or other patients.
- Making threats of violence through phone calls, letters, voicemail, email or other forms of written, verbal or electronic communication.
- Damaging business equipment or property.
- Making menacing or derogatory gestures.
- Making racial, cultural, or sexual slurs or other derogatory remarks.

As a patient, if you are subjected to any of these behaviors or witness inappropriate behavior, please report it to any staff member. Violators are subject to removal from the facility and/or dismissal from the practice.

PIWH appreciates your understanding.

Signature of Patient or Responsible Party

Date

Signature of Witness