

Mandell's Clinical Pharmacy
CLIENT/PATIENT HANDOUTS
CLIENT/PATIENT BILL OF RIGHTS AND RESPONSIBILITIES

We believe that all client/patients receiving services from Mandell's Clinical Pharmacy should be informed of their rights. Therefore, you are entitled to:

1. Receive reasonable coordination and continuity of services from the referring physician for fertility medication services.
2. Receive a timely response from Mandell's Clinical Pharmacy when service is needed or requested.
3. Be fully informed in advance about service to be provided and any modifications to the Plan of Service.
4. Participate in the development and periodic revision of the Plan of service.
5. Informed consent and refusal of service after the consequences of refusing service are fully presented.
6. Be informed in advance of the charges, including payment for service expected from third parties and any charges for which the client/patient will be responsible.
7. Have one's property and person treated with respect, consideration, and recognition of client/patient dignity and individuality.
8. Be able to identify staff members through proper identification.
9. Voice grievances/complaints or recommend changes in policy, staff or service without restraint, interference, coercion, discrimination or reprisal.
10. Choose a health care provider.
11. Confidentiality and privacy of all information contained in the client/patient record and of Protected Health Information.
12. Be informed on agency's policies and procedures regarding the disclosure of client/patient records.
13. Be informed of any financial benefits when referred to an organization.
14. Receive appropriate service/care without discrimination in accordance with physician orders.
15. Be fully informed of one's responsibilities.
16. Be informed of provider service limitations.
17. Be informed of client/patient rights under state law to formulate advance care directives, if applicable.
18. Be informed of anticipated outcomes of service and of any barriers in outcome achievement.
19. Identify staff members and their job titles, and speak with a supervisor of the staff member is requested.
20. Receive information about the Patient Management Program.
21. Receive administrative information regarding changes in or termination of the Patient Management Program.
22. The right to decline participation, revoke consent or disenroll from the Patient Management Program at any point in time.

CLIENT/PATIENT RESPONSIBILITIES

1. Client/patient agrees to use the medication for the purposes so indicated on the physician's prescription.
2. Client /patient agree to promptly report to Mandell's Clinical Pharmacy any discrepancies/shortages/damages within 24 hours of receipt of order, so that replacement can be arranged.
3. Client/patient agrees to notify Mandell's Clinical Pharmacy of any change in customer insurance, address, telephone number or physician.
4. Client/patient agrees that Mandell's Clinical Pharmacy shall not insure or be responsible to the client/patient for any personal injury related to any service; including that caused by use or improper use; the act or omission of any other third party, or by any criminal act or activity, war, riot, insurrection, fire or act of God.
5. Client /patient understand that Mandell's Clinical Pharmacy retains the right to refuse delivery of service to any client/patient at any time.
6. Client/patient agrees to request payment of authorized Medicare, Medicaid, or other private insurance benefits are paid directly to Mandell's Clinical Pharmacy for any services furnished by Mandell's Clinical Pharmacy.
7. Client/patient agrees that any legal fees resulting from a disagreement between the parties shall be borne by the unsuccessful party in any legal action taken.
8. Client/patient agrees to provide accurate clinical and contact information; Client/patient agrees to notify the Patient Management Program of changes to this information.
9. Client/patient agrees to notify their treating provider of their participation in the patient management program, if applicable.

When the client/patient is unable to make medical or other decisions, the family should be consulted for direction.

All staff members will understand and be able to discuss the Client Bill of Rights and Responsibilities with the client/patient. Each staff member will receive training and attend an in-service education class on the Client Bill of Rights and Responsibilities, as needed.

In case of emergency contact: Fire, Police, and Ambulance: **911**

Hospital: _____ Phone: _____

Home Care Agency: _____ Phone: _____

Doctor: _____ Phone: _____

Mandell's Clinical Pharmacy..... Phone: 877-252-0553