

# Patient Rights & Responsibilities

## You have the right to:

- Healthcare regardless of age, race, gender, religion, disability, national origin or sexual orientation.
- Respect for personal dignity and privacy
- Confidentiality of medical records: State and Federal Law forbids the release of your medical records without your written consent, except in specific situations where law requires Utah Physicians to release information
- Know the identity of the healthcare professional providing services.
- Expect diagnosis, prognosis, and method(s) of treatment to be explained clearly.
- Be informed about any risk of serious side effects.
- Participate in decisions involving your healthcare, including managing pain effectively.
- Know what alternatives exist for healthcare and treatment.
- Refuse medical care (except in specific situations as requires by law).
- A second opinion.
- Know if treatment involves experimental or research protocols and the right to refuse participation.
- Prepare an Advanced Directive.
- Request a change of provider if another qualified provider is available.
- Express your concerns, if these rights have not been met.

## You have the responsibility to:

- Keep appointments as scheduled or notify us in advance if you are unable to do so. This will allow another patient to have an appointment.
- Provide, to the best of your knowledge, accurate information relating to health history and current health status, as well as, the most up to date contact information.
- Cooperate in the treatment plan recommended by those primarily responsible of your care.
- Consult your medical care provider if your health problem doesn't follow the expected course.
- Accept personal responsibility for refusing treatment.
- Abide by the health center and clinic regulations and policies.
- Respect the rights of Physician's personnel, other patients and visitors.
- Ask adequate questions to ensure the understanding of your health problem and treatment.
- Recognize that you make decisions daily that impact your personal health and treatment.
- Accept Financial responsibility for services received, and provide information necessary to obtain insurance, Medicare, Medicaid, or other third-party payment.

For questions or concerns please contact:  
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