

PATIENT RESPONSIBILITIES

1. Client agrees that rental equipment will be used with reasonable care, not altered or modified and returned in good condition (normal wear and tear expected).
2. Client agrees to promptly report to Alliance Medical Services any malfunctions or defects in rental equipment so that repair/replacement can be arranged.
3. Client agrees to provide Alliance Medical Services access to all rental equipment for repair/replacement, maintenance, and/or pick-up of the equipment.
4. Client agrees to use the equipment for the purposes so indicated in compliance with the physician's prescription.
5. Client agrees to keep the equipment in their possession and at the address, to which it was delivered unless otherwise authorized by Alliance Medical Services.
6. Client agrees to notify Alliance Medical Services of any hospitalization, change in customer insurance, address, telephone number, physician, or when the medical need for the rental equipment no longer exists.
7. Client agrees to request payment of authorized Medicare, Medicaid, or other private insurance benefits are paid directly to Alliance Medical Services for any services furnished by Alliance Medical Services.
8. Client agrees to accept all financial responsibility for home medical equipment furnished by Alliance Medical Services.
9. Client agrees to pay for the replacement cost of any equipment damaged, destroyed, or lost due to misuse, abuse, or neglect.
10. Client agrees not to modify the rental equipment without the prior consent of Alliance Medical Services.
11. Client agrees that any authorized modification shall belong to the titleholder of the equipment unless equipment is purchased and paid for in full.
12. Client agrees that title to the rental equipment and all parts shall remain with Alliance Medical Services at all times unless equipment is purchased and paid for in full.
13. Client agrees that Alliance Medical Services shall not insure or be responsible to the client for any personal injury or property damage related to any equipment; including that caused by use of improper functioning of the equipment; the act or omission of any other third party, or by any criminal act or activity, war, riot, insurrection, fire or act of God.
14. Client understands that Alliance Medical Services retains the right to refuse delivery of service to any client at any time.
15. Client agrees that any legal fees resulting from a disagreement between the parties shall be borne by the unsuccessful party in any legal action taken.
16. Client understands that they be informed by Alliance Medical Services in advance of any changes in the Plan of Care.
17. It is the Client's right:
 - To be free from mental and/or physical abuse.
 - To refuse experimental treatment and/or experimental drugs.
 - To be treated with dignity in our Plan of care.
 - Right to receive or not receive treatment.
 - Right to privacy of care
18. The Client has the right to be treated granted by their civil rights without any discrimination noted by Alliance Medical Services.
19. When the client/patient is unable to make medical or other decisions, the family should be consulted for direction.