

We're here for you

If you ever have feedback, big or small, we're always here to listen.

If you have questions or need to report a concern, please contact:

PHONE

206-851-2242

EMAIL

scheduling@flourishchiropracticspa.com

ADDRESS

417 E Pine St, Suite P
Seattle WA 98122

WEBSITE

flourishchiropracticspa.com



Your Rights

As A Patient

Our number one priority is for you to feel safe and get the care that you need.

Please take a moment to read this pamphlet so you are fully aware of your rights as a patient.

Your Rights

1. Respectful and Non-Discriminatory Care

You have the right to receive considerate, respectful, and compassionate care in a safe environment—regardless of race, ethnicity, religion, gender identity, sexual orientation, age, disability, or background



2. Privacy and Confidentiality

Your personal and medical information will be kept confidential, in compliance with HIPAA and state laws. You have the right to request how your information is communicated and accessed. Our wifi is also fully encrypted.

Your Responsibilities



3. Informed Consent

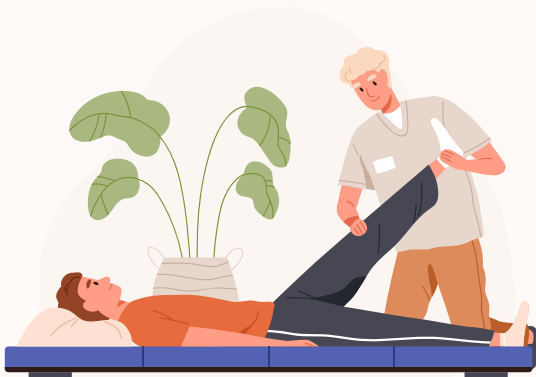
Before starting any treatment, you have the right to receive clear information about your diagnosis, treatment options, potential benefits and risks, and expected outcomes. You may ask questions and take time to decide.

4. Participation in Care Decisions

You have the right to be actively involved in your care, including accepting or refusing treatment at any time. Your choices will be respected and honored whenever clinically appropriate and legally possible.

5. Timely and Accessible Care

You have the right to receive care in a timely manner and to reasonable access to appointments, follow-ups, and communication with your provider.



- Provide accurate health and insurance information
- Arrive on time and give appropriate notice of cancelations
- Follow Treatment plans and ask questions when unclear.
- Treat staff and other patients with courtesy and respect

6. Cultural and Personal Values

You have the right to have your cultural, spiritual, and personal values respected in all aspects of your care.

7. Know Your Provider

You have the right to know the name, credentials, and licensure status of your provider and to request a different provider if available.

8. Financial Transparency

You have the right to know the costs of services, payment policies, insurance billing practices, and any expected out-of-pocket expenses before receiving care.

9. Safety Within the Office

Our office has a call box that is monitored for who can access the building and we have a recorded security camera in the office public area for everyone's safety. The only time we will use this or send this anywhere is if there is a safety, ethical or legal issue.

10. Complaints and Feedback

You have the right to voice concerns or complaints without fear of retaliation. Your feedback helps us improve.