§ 4710. Shared health facilities; quality of care requirements. 1. To ensure quality, continuity and proper coordination of medical care, each shared health facility shall:

(a) designate an individual who shall coordinate and manage the facility's activities. The person so designated shall be responsible for compliance with the provisions of this article;

(b) devise an appropriate means of insuring that (i) patients will be scheduled to return for appropriate follow-up care and (ii) will be treated by a practitioner familiar with the patient's medical history;

(c) post conspicuously the names and scheduled office hours of all practitioners practicing in the facility;

(d) maintain proper records which shall contain at least the following information:

(i) the full name, address and program number of each patient;

(ii) the dates of all visits to all providers in the shared health facility;

(iii) the chief complaint for each visit to each provider in the shared health facility;

(iv) pertinent history and all physical examinations rendered by each provider in the shared health facility;

(v) diagnostic impressions for each visit to any provider in the shared health facility;

(vi) all medications prescribed by any provider in the shared health facility;

(vii) the precise dosage and prescription regimens for each medication prescribed by a provider in the shared health facility;

(viii) all x-ray, laboratory work and electrocardiograms ordered at each visit by any provider in the shared health facility, and their results;

(ix) all referrals by providers in the shared health facility to other medical practitioners and the reason for such referrals; and

(x) a statement as to whether or not the patient is expected to return for further treatment and the dates of all return appointments;

(e) assign an individual and clearly identified practitioner to all patients. This assignment may be changed at any time at the patient's discretion;

(f) make available to registered patients either:

(i) the central answering service telephone number of each patient's designated practitioner or such practitioner's personally designated colleagues, or

(ii) a centralized twenty-four-hour-a-day, seven-day-weekly telephone line for off-hour emergency patient questions;

(g) maintain a central day-book registry which shall record:

(i) the name and program number of all patients entering the facility; and

(ii) the chief complaint and the names of all providers whose services were requested by the patient and/or to whom such patient was referred; and

(h) insure that the physical facilities of each shared health facility shall provide for maximum privacy for all patients during examination, interview and treatment;

(i) post conspicuously the telephone number of the agency within the department of health which is responsible for providing information concerning shared health facilities and/or for receiving complaints concerning the provision of health care services at shared health facilities.

2. It shall be the responsibility of each facility's administrator to ensure that patient records and summaries of all patient visits including diagnosis and pharmaceuticals prescribed are at all times available at either the facility or at a place immediately accessible to all health providers at the facility.

3. Nothing in this article shall in any way be interpreted as infringing upon the patient's right to free selection of a personal practitioner.

4. The department shall have the right to inspect the business records, patient records, leases and other contracts executed by any provider in a shared health facility. Such inspections may be by site visits to the facility.