

# Patients' Rights and Responsibilities

## Your Right to Considerate and Respectful Care

### You have the right to:

- Access care that is available and medically necessary. If it is necessary to transfer you to another facility, the need for the transfer and the alternatives to transfer will be explained to you.
- Receive considerate and respectful care that supports your dignity within the scope of our mission that recognizes your personal dignity, values, and beliefs.
- Wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures or treatment.
- Receive cultural comforts and maintain spiritual identity during treatment.
- Request and receive an itemized and detailed explanation of your total bill for services rendered in the facility, regardless of the source of payment.
- Receive timely and competent clinical care.
- Receive prompt pain assessment, treatment, and information concerning the origin of your pain, and pain prevention/relief measures.
- Be informed of and participate in decisions regarding your care.
- Express concerns about any aspect of your treatment without fear of retaliation, and/or to utilize the facility's grievance process for unresolved concerns /issues.

### Whether or not you choose to utilize the facility's grievance process, you may file your grievance with:

#### Arizona

Arizona Department of Health Services  
150 N 18th Ave., Phoenix, AZ 85007  
602-364-3030

Arizona State Attorney General's Office  
2005 N. Central Ave., Phoenix, AZ 85004  
602-542-5025

#### California

California Department of Public Health  
P.O. Box 997377, MS 0500  
Sacramento, CA 95899  
916-558-1784

#### Colorado

Colorado Department of Public Health and Environment  
4300 Cherry Creek Dr. South  
Denver, CO 80246  
303.692.2000

Department of Regulatory Agencies (DORA)  
303.894.7855  
www.colorado.gov/dora

#### Nebraska

Nebraska Department of Health and Human Services  
P.O. Box 95026, Lincoln, Nebraska 68509  
402-471-3121

#### Nevada

Nevada Division of Public and Behavioral Health Bureau of Healthcare Quality and Compliance  
727 Fairview Dr., Suite E  
Carson City, NV 89701  
702-486-3587

#### Wyoming

Wyoming Department of Health  
401 Hathaway Building  
Cheyenne, WY 82002  
1-866-571-0944 or 307-777-7656

#### Office of Quality and Patient Safety

The Joint Commission  
• At [www.jointcommission.org](http://www.jointcommission.org), using the "Report a Patient Safety Event" link in the "Action Center" on the home page of the website

- By fax to: 630-792-5636
- By mail to: Office of Quality and Patient Safety, The Joint Commission, One Renaissance Boulevard Oakbrook Terrace, IL 60181 and/or  
**Health Services Advisory Group, Inc.**  
3133 E. Camelback Rd.,  
Phoenix AZ 85016  
602-801-6600

## Your right to information and participation in care you or your surrogate decision maker have the right to:

- Be well informed about your illness and care and to make informed health care decisions. To the degree possible, information will be based on a clear, concise explanation of your condition and all proposed procedures, including likely outcomes, alternatives for care, and problems related to recuperation/recovery.
- Receive clear and prompt answers to your health care questions.
- Participate in the development and implementation of your plan of care and treatment, including pain management.
- Consent or refuse treatment, as permitted by law, throughout your facility stay. If you refuse a recommended treatment, you will receive other needed and available care consistent with your wishes.
- Consent or decline to take part in available research affecting your care. If you choose not to participate, you will receive the most effective care the facility otherwise provides.
- Know the names and roles of the people treating you.
- Review and obtain a copy of your medical records within a reasonable time frame, except when restricted by law.
- Request a consultation with a specialist.
- Have access to visitors and to communicate with persons outside the facility, except where restrictions are necessary because of patient safety/health concerns. If restrictions are necessary, they will be explained to you and your family.
- Notify family members, representatives and/or your own physician of your admission to the facility.
- Request an interpreter in your preferred language, or request other reasonable means of communication in order to communicate effectively with health care providers.
- Be informed of relationships the facility has with outside parties that may influence your treatment and care. These relationships may be with educational institutions and/or other health care providers.

## Your Right to Privacy and Confidentiality

### You have the right to:

- Verbal and physical privacy as much as is reasonably possible.
- Refuse to see anyone not officially connected with the facility. You may also refuse to see persons who are officially connected with the facility, but are not directly involved in your care.
- Request to have a person of your own sex present during certain parts of an examination, procedure, or treatment performed by a health professional of the opposite sex.
- Expect that your medical records will

be reviewed only by those individuals directly involved in your care unless you have given permission to release information or unless the release of information is required or permitted by law.

- Expect that your medical information will only be available to those persons involved in your care and to those authorized in the Condition of Admission or otherwise authorized by you.
- Refuse care by a student or to have such individuals present during your care.

## Your Right to Ethical Decisions

### You have the right to:

- Participate in ethical questions that arise in the course of care, including issues of conflict resolution, withholding resuscitative services, forgoing or withdrawal of life-sustaining treatment and participation in investigational studies or clinical trials.
- Have an advance directive, such as a Living Will, Health Care Power of Attorney, and/or Mental Health Care power of Attorney, and receive care that is consistent with these directives. These documents express your choices about your future care and/or name someone to make decisions for you if you cannot make or communicate your own health care decisions. If you have a written advance directive, you should provide a copy to the facility, your family, and your doctor.
- Receive written information on your rights under state law to make decisions about medical care, [including the right to accept or refuse medical or surgical treatment and the right to prepare a Health Care Power of Attorney or Living Will].
- Designate a decision maker in the event you are incapable of understanding a proposed treatment or procedure or are unable to communicate your wishes regarding care.
- Access the Ethics Committee if your personal values or those of your family are in conflict with your treatment.
- Consent/refuse to participate in any research study.
- Know you will not be discriminated against or your treatment limited based upon whether or not you decide to prepare a Living Will or Health Care Power of Attorney.

## Your Right to Safety and Security

### You have the right to:

- Expect reasonable safety and security in the facility practices and environment.
- Be protected from any form of physical abuse, physical punishment, sexual abuse, verbal abuse and psychological abuse including humiliating, threatening and exploitative actions.
- Seek advocacy services to investigate and/or protect you from abuse, neglect and/or fraud.
- Be free from chemical or physical restraints and seclusion unless clinically necessary.

## Your Responsibility to Information and Participation in Care

### You are responsible to:

- Provide accurate and complete information about your health, including present complaints, past illnesses, treatments, and medication use.

- Participate in your plan of care and report unexpected changes in your condition to your caregivers, as you are able.
- Follow your doctor's orders and instructions and the facility staff's instructions for your treatment and care.
- Tell your doctor if you feel you cannot follow through with your treatment, and be prepared to accept responsibility for refusing treatment. Make sure to ask your doctor about the risks and consequences for refusal prior to making decisions.
- Work with your health team to develop a pain management plan that includes assisting your doctors and nurses in assessing your pain, asking for pain relief when pain first begins, discussing pain relief options, and informing your doctors and nurses when pain is not relieved.
- Ask questions when you do not understand information or instructions.
- Keep appointments, and when unable to do so for any reason, notify the responsible practitioner or the facility.
- Communicate to your health care provider your spiritual, emotional, and cultural needs.
- Recognize the effect of lifestyle on your personal health. Your health depends not just on your facility care, but in the long term, your health depends on the decisions you make in your daily life.
- Periodically review your Living Will or Health Care Power of Attorney, if you have one, with your family, your physician, and the person you have selected to represent you.
- Bring an updated copy of your Living Will or Health Care Power of Attorney to be placed in your medical record at the time of each admission.

## Your Responsibility to Facility Rules & Regulations

### Your responsibilities are to:

- Assure that the financial obligations of your health care are fulfilled as promptly as possible. Provide insurance information and pay your bill promptly so we can continue to serve you and the community effectively.
- Credit balances are reviewed weekly and once verified will be refunded within two weeks.
- Be considerate of the needs and rights of other patients, staff, and facility and follow the rules and regulations of the facility.
- Respect the need of other patients for privacy and quiet. Consider other patients when using your television, radio, or telephone.
- Place all valuables (jewelry, money, etc.) in the facility safe or send them home with family.
- Tell staff what personal items (dentures, glasses, hearing aids, etc.) you are keeping with you in the facility. You will be responsible for taking care of these items during your stay.
- Be respectful of the healing environment.
- Observe the non-smoking policy.
- Observe visiting hours and discharge times.
- Refrain from initiation or participation in fraudulent health care practices and report illegal or unethical behavior by providers to the appropriate medical societies, licensing boards or law enforcement authorities.