



CRISP REGIONAL HEALTH SERVICES

"Professionally Serving. Personally Caring"

www.crispregional.org

PATIENT RIGHTS

Access to Care

You shall be accorded impartial access to treatment or accommodations that are available or medically indicated, regardless of race, creed, sex, national origin, or sources of payment for care.

Respect and Dignity

You have the right to considerate, respectful care at all times and under all circumstances, with recognition of your personal dignity.

Privacy and Confidentiality

You have the right, within the law, to personal informational privacy, as manifested by the following rights:

- To refuse to talk with or see anyone not officially connected with the hospital, including visitors, or persons officially connected with the hospital but not directly involved in your care.
- To wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures or treatment.
- To be interviewed and examined in surroundings designed to assure reasonable visual and auditory privacy. This includes the right to have a person of your own sex present during certain parts of a physical examination, treatment or procedure performed by a health professional of the opposite sex and the right not to remain disrobed any longer than is required for accomplishing the medical purpose for which you were asked to disrobe.
- To expect that any discussion or consultation involving your care will be conducted discreetly and that individuals not directly involved in your care will not be present without your permission.
- To have your medical record read only by individuals directly involved in your treatment or in the monitoring of its quality. Other individuals can only read your medical record on your written authorization or that of your legally authorized representative. Also, you or your legally designated representative has access to the information contained in the medical record, within the limits of the law and hospital policies.
- To expect all communications and other records pertaining to your care, including the source of payment for treatment, to be treated as confidential.
- To request a transfer to another room if another patient or a visitor in the room is unreasonably disturbing you by any action. Facilitation of a room transfer will depend upon room availability and requirements of your care.
- To be placed in protective privacy when considered necessary for personal safety.

Personal Safety

You have the right to expect reasonable safety insofar as the hospital practices and environment are concerned.



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Identity

You have the right to know the identity and professional status of individuals providing service to you and to know which physician or other practitioner is primarily responsible for your care. This includes your right to know of the existence of any professional relationship among individuals who are treating you, as well as the relationship to any other healthcare or educational institutions, and when your care or treatment involves the gathering of data for research or experimental purposes.

Information

You have the right to obtain, from the practitioner responsible for coordinating your care, complete and current information concerning your diagnosis (to the degree known), treatment, and any known prognosis. This information should be communicated in terms that you can reasonably understand. When it is not medically advisable to give such information to you, the information should be made available to a legally authorized individual.

Communication

You have the right of access to people outside the hospital by means of visitor and by verbal and written communication.

When you do not speak or understand the predominant language of the community, you shall have access to an interpreter. This is particularly true where language barriers may affect your understanding of your care and treatment.

Consent

You have the right to reasonable informed participation in decisions involving your healthcare, as permitted and governed by law. To the degree possible, this should be based on a clear, concise explanation of your condition and of all proposed technical procedures, including the possibilities of any risk of mortality or serious side effects, problems related to recuperation, and probability of success. You should not be subjected to any procedure without your voluntary, competent, and understanding consent or the consent of your legally authorized representative. Where medically significant alternatives for care or treatment exist, you shall be so informed.

You have the right to know who is responsible for authorizing and performing the procedures or treatment.

You shall be informed if the hospital proposes to engage in or perform human experimentation or other research/educational projects affecting your care or treatment. You have the right to refuse to participate in such activity.

Consultation

You, at your own request and expense, have the right to consult with a specialist.

Hospital Charges



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You have the right to request and receive an itemized and detailed explanation of your total bill for services rendered in the hospital, regardless of the source of payment for your care. You have the right to timely notice prior to termination of your eligibility for reimbursement by any third-party payer for the cost of your care.

Refusal of Treatment

You may refuse treatment to the extent permitted by law. When refusal of treatment by you or your legally authorized representative prevents the provision of appropriate care in accordance with professional standards, the relationship with you may be terminated upon reasonable notice.

Resolving Conflicts

You have the right, without recrimination, to voice complaints regarding the care received, and to have those complaints reviewed and, when possible, resolved.

If you and your physician on the staff of the hospital disagree on your course of treatment, you (or in the case of a minor, his or her parents or guardian), have a right to discharge the physician from your care and engage the professional services of another physician. It is your responsibility to engage the services of an alternative physician (or alternate physicians) assuming such physician is approved to practice at this institution.

Transfer and Continuity of Care

You may not be transferred to another facility or organization unless you have received a complete explanation of the need for the transfer and of the alternatives to such a transfer and unless the transfer is acceptable to the other facility or organization. You have the right to be informed by the practitioner responsible for your care, or your delegate, of any continuing healthcare requirements following discharge from the hospital.

Hospital Rules and Regulations

You have the right to know about hospital rules if and when they become applicable to your conduct as a patient. You have the right to know about hospital resources such as patient representatives, chaplains or ethics committees that can help you resolve problems and questions about your hospital stay and care.

Advance Directives

You have the right to have an Advance Directive, such as a living will, healthcare proxy, or surrogate decision maker. These documents express your choices about your future care or name someone to decide if you cannot speak for yourself. If you have a written Advance Directive, you should provide a copy to the hospital, your doctor, and your family. The hospital will honor the intent of that directive to the extent provided by law and hospital policy.