Patient Rights & Responsibilities

The basic rights of human beings for independence of expression, decision, and action, and concern for personal dignity and human relationships are always of great importance. During sickness, however, the presence or absence of these rights becomes a vital, deciding factor in survival and recovery. Thus, it becomes a prime responsibility for hospitals to endeavor to assure that these rights are preserved for their patients.

In providing care, hospitals have the right to expect behavior on the part of patients and their relatives and friends, which considering the nature of their illness, is reasonable and responsible.

This statement does not presume to be all-inclusive. It is intended to convey the Joint Commission’s concern about the relationship between hospitals and patients and to emphasize the need for the observance of the rights and responsibilities of patients.

The following basic rights and responsibilities of patients are considered reasonably applicable to all hospitals.

Patients Rights

Access to Care. Individuals 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. The patient has the right to considerate, respectful care at all times and under all circumstances, with recognition of his personal dignity.

Privacy and Confidentiality. The patient has the right, within the law, to personal and 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 his care.
- To wear appropriate personal clothing and religious or other symbolic items, as long as they do not interfere with diagnostic procedures or treatments.
• To be interviewed and examined in surroundings designed to assure reasonable visual and auditory privacy. This includes the right to have a person of one’s 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 the patient was asked to disrobe.

• To expect that any discussion or consultation involving his case will be conducted discreetly and that individuals not directly involved in his care will not be present without his permission.

• To have his medical record read only by individuals directly involved in his treatment or in the monitoring of its quality. Other individuals can only read his medical record on his written authorization or that of his legally authorized representative.

• To expect all communications and other records pertaining to his 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 him.

• To be placed in protective privacy when considered necessary for personal safety.

Personal Safety. The patient has the right to expect reasonable safety insofar as the hospital practices and environment are concerned.

Identity. The patient has the right to know the identity and professional status of individuals providing service to him and to know which physician or other practitioner is primarily responsible for his care. This includes the patient’s right to know of the existence of any professional relationship among individuals who are treating him, as well as the relationship to any other health care or educational institutions involved in his care. Participation by patients in clinical training programs or in the gathering of data for research purposes should be voluntary.

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

Communication. The patient has the right of access to people outside the hospital by means of visitors and by verbal and written communication. When the patient does not speak or understand the predominant language of the community, he should have access to an interpreter. This is particularly true where language barriers are a continuing problem.

Consent. The patient has the right to reasonable information and participation in decisions involving his health care. To the degree possible, this should be based on a clear, concise explanation of his 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. The patient should not be subjected to any procedure without his voluntary, competent, and understanding consent or the consent of his legally authorized representative. Where medically significant alternatives for care treatment exist, the patient shall be so informed.

The patient has the right to know who is responsible for authorizing and performing the procedures or treatment.

The patient shall be informed if the hospital proposes to engage in or perform human experimentation or other research/educational projects affecting his care or treatment; the patient has the right to refuse to participate in any such activity.

**Consultation.** The patient, at his own request and expense, has the right to consult with a specialist.

**Refusal of Treatment.** The patient may refuse treatment to the extent permitted by law. When refusal of treatment by the patient or his legally authorized representative prevents the provision of appropriate care in accordance with professional standards, the relationship with the patient may be terminated upon reasonable notice.

**Transfer and Continuity of Care.** A patient may not be transferred to another facility or organization unless he has 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. The patient has the right to be informed by the practitioner responsible for his care, or his delegate, of any continuing health care requirements following discharge from the hospital.

**Hospital Charges.** Regardless of the source of payment for his care, the patient has the right to request and receive an itemized and detailed explanation of his total bill for services rendered in the hospital. The patient has the right to timely notice prior to termination of his eligibility for reimbursement by any third-party payer for the cost of his care.

**Hospital Rules and Regulations.** The patient should be informed of the hospital rules and regulations applicable to his conduct as a patient. Patients are entitled to information about the hospital’s mechanism for the initiation, review, and resolution of patient complaints.

**Pain Management.** The patient’s right to pain management will be respected and supported. As a patient, you can expect:
- Information about pain and pain relief measures.
- A concerned staff committed to pain prevention.
- Health professionals who respond quickly to reports of pain.
- State-of-the-art pain management.
Patient Responsibilities

**Provision of Information.** A patient has the responsibility to provide, to the best of his knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to his health. He has the responsibility to report unexpected changes in his condition to the responsible practitioner. A patient is responsible for reporting whether he clearly comprehends a contemplated course of action and what is expected of him.

**Compliance Instructions.** A patient is responsible for following the treatment plan recommended by the practitioner primarily responsible for his care. This may include following the instructions of nurses and allied health personnel as they carry out the coordinated plan of care, implement the responsible practitioner’s orders, and enforce the applicable hospital rules and regulations. The patient is responsible for keeping appointments and, when he is unable to do so for any reason, for notifying the responsible practitioner or the hospital.

**Refusal of Treatment.** The patient is responsible for his actions if he refuses treatment or does not follow the practitioner’s instructions.

**Hospital Charges.** The patient is responsible for assuring that the financial obligations of his health care are fulfilled as promptly as possible.

**Hospital Rules and Regulations.** The patient is responsible for following hospital rules and regulations affecting patient care and conduct.

**Respect and Consideration.** The patient is responsible for being considerate of the rights of other patients and hospital personnel and for assisting in the control of noise, smoking, and the number of visitors. The patient is responsible for being respectful of the property and of the hospital.

**Pain Management.** The patient is responsible for notifying the staff about their needs regarding pain and/or the effectiveness of pain control. As a patient, we expect that you will:

- Ask your doctor or nurse what to expect regarding pain and pain management.
- Discuss pain relief options with your doctor or nurse.
- Work with your doctor and nurse to develop a pain management plan.
- Ask for pain relief when pain first begins.
- Help the doctor and nurse measure your pain.
- Tell the doctor or nurse if your pain is not relieved.

To contact the patient representative, call TCRH at (276) 236-8181 and ask the operator to electronically page the Customer Service Representative.