



PATIENT'S BILL OF RIGHTS

As a patient, you have the right:

- A. to have cultural, psychosocial, spiritual, and personal values, beliefs, and preferences respected;
- B. to considerate and respectful care given by competent personnel with regard to personal dignity;
- C. to quality care and professional standards that are continually maintained and evaluated;
- D. to have impartial access to the resources of the hospital indicated for your care without regard to race, color, creed, national origin, beliefs, values, language, functional status, disability, age, sex, sexual preference, handicap or source of payment;
- E. to hear from your physician, in language you can reasonably be expected to understand, your diagnosis, the treatment prescribed for you, the prognosis of your illness, any alternative treatments, and any instruction required to follow-up care; to review your medical records and to have the information explained or interpreted as necessary, except when restricted by law;
- F. to hear from your physician a full explanation when there is an unanticipated outcome of treatment; and to expect that subsequent required reporting and analysis will occur as well as any applicable financial considerations;
- G. to be informed of the facility rules and regulations that apply to your conduct as a patient and to receive materials at the time of admission regarding hospital rules and regulations, patient's rights and complaint/grievance mechanisms;
- H. to be given the name of the attending physician and other physicians responsible for coordinating your care and to be informed of the names of other professionals at the time of their involvement in your care;
- I. to be informed about the general nature, risks and alternative of any procedures or treatments prescribed for you so that you or your authorized representative can give informed consent prior to the event, except for emergencies;
- J. to expect emergency procedures to be implemented without unnecessary delay;
- K. to, in collaboration with your physician and caregivers, make decisions involving your health care, and participate in the development and implementation of your plan of care including the right to refuse treatment including forgoing or withdrawing life sustaining treatment or withholding resuscitative services to the extent permitted by law and to be informed of the medical consequences of this action;
- L. to be provided education about pain and pain management measures including pharmacological and non-pharmacological interventions for pain management; a concerned staff committed to pain prevention and management; a staff that believes your reports of pain and who will respond promptly to your reports of pain; and pain management will be regularly reassessed and modified to achieve optimal pain control;

M. to not be awakened by hospital staff unless medically necessary and to medical and nursing treatment that avoids unnecessary physical and mental discomfort and needless duplication;

N. to be provided access to spiritual care in a manner consistent with your faith and religious tradition;

O. to assistance in obtaining consultation with another physician at the patient's request and expense;

P. to expect your personal privacy to be respected, consistent with the care prescribed for you and to expect all communications and records pertaining to your care to be kept confidential;

Q. to request a discharge planner; and to expect that the facility will provide a mechanism whereby you are informed upon discharge of your continuing health care requirements following discharge and the possible means for meeting them;

R. when medically permissible, to be transferred to another facility only after you have been given complete information and explanation concerning the needs for and alternatives and risks to such transfer;

S. to be given the benefit of participation in clinical training programs offered by the institution;

T. to be informed of any human experimentation research or donor programs the hospital may propose which would affect your care or treatment so that you or your authorized representative can give consent prior to the event;

U. to examine and receive an explanation of your bill, regardless of source of payment and to identify available financial information;

V. to participate in the consideration of ethical issues that arise in your care and to formulate advance directives; WFBMC will respect your Advance Health Care Directives. Complaints related to Advance Directive requirements may be filed with the state survey and certification agency.

W. to expect your rights and responsibilities to be extended to your authorized representative if you are unable to act on your own behalf or if you are underage as in the case of a neonate, child, or adolescent;

X. to have access to interpreting services and translated materials.

Y. to speak with your physician or nurse or to contact the Service Excellence Department for assistance in the resolution of any concerns or complaints you have regarding your care; grievances (written or verbal) may be filed with the Service Excellence Department. Information regarding how to lodge a grievance with governing state agencies and The Joint Commission is noted below and also available in the Service Excellence Department;

Z. upon request, to have a family member/representative of your choice and your own physician notified promptly of your admission to the hospital;

AA. to receive visitors whom you designate including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend. Visitation privileges will not be restricted/limited on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability. You may withdraw or deny such consent at any time.

BB. to not be denied access to an individual or agency who is authorized to act on your behalf or assert or protect your rights;

CC. to receive care in a safe setting and be free from all forms of abuse and harassment;

DD. to be free from restraints of any form that are not medically necessary or are used as a means for coercion, discipline, convenience, or retaliation by staff; and

EE. upon request, to have access to all information contained in the patient's medical records as allowed by law and regulations. A patient's access to medical records may be restricted by the patient's attending physician. If the physician restricts the patient's access to information in the patient's medical record, the physician shall record the reasons in the patient's medical record. Access shall be restricted only for sound medical reason. A patient's designee may have access to the information in the patient's medical records even if the physician restricts the patient's access to those records.

PATIENT'S RESPONSIBILITIES

As a patient you in turn have the responsibility:

A. to know and follow hospital rules and regulations;

B. to give cooperation and to follow the care for which you have given consent and which was prescribed or recommended for you by your physician, nurse, or allied health professional;

C. to provide, to the best of your knowledge, accurate and complete information about present complaints, past illnesses, hospitalization, medications, and other matters relating to your health; and to report any perceived risks in your care and any unexpected changes in your condition;

D. to follow the care, treatment and service plan developed and to express any concerns about your ability to follow the proposed care plan or course of care, treatment and services;

E. to have your treatment plan adapted to your specific needs and limitations; and if such adaptations are not recommended, you and your family will be informed of the consequences of the care, treatment and service alternatives and not following the proposed course;

F. to accept the outcomes of not following the care, treatment, and service plan;

G. to notify your physician or the nurse manager of the unit if you do not understand what you are expected to do or have questions regarding your care, treatment or service;

H. to let the nurse manager and your family know if you feel you are receiving too many outside visitors;

I. to ask your doctor or nurse what to expect regarding pain and pain management; to discuss pain relief options with your doctors and nurses and to work with your doctor and nurse to develop a pain management plan; to ask for pain relief when pain first begins; to help your doctor and nurse assess your pain; to tell your doctor or nurse if your pain is not relieved; and to tell your doctor or nurse about any worries you have about taking pain medication.

J. to respect the privacy of your roommate;

K. to accept your financial obligations associated with your care;

L. to advise the charge nurse, physician, or Service Excellence of any dissatisfaction you may have in regard to your care at the hospital;

M. to be considerate of the rights of other patients and hospital personnel and to assist in the control of noise, smoking and the number of visitors you receive; and

N. to speak up and ask questions of your physician, nurse or any other hospital staff member if you are confronted with something you do not understand – whether it is a diagnosis or a medical procedure or simply how to find the cafeteria.

If you need additional assistance with any problem or concern, our Service Excellence Department stands ready to help you at 713-2273. Presentation of a complaint will in no way compromise your future access to care. You may lodge a grievance with the Division of Health Service Regulation at 2711 Mail Service Center, Raleigh, NC 27609-2711 or telephone 1-800-624-3004; The Joint Commission at One Renaissance Boulevard, Oakbrook Terrace, IL 60181 or telephone 1-800-994-6610 or Disability Rights North Carolina at 2626 Glenwood Avenue, Ste. 550, Raleigh, NC 27608 or toll free 1-877-235-4210.