Patient Rights and Responsibilities

Columbus Regional Hospital views each patient as distinct with unique health care needs. We affirm the patient's rights and involve the patient in making decisions about care, treatment, services, and discharge. This includes the decision to stop treatment, to the extent allowed by law. We respect the culture, gender, personal dignity, and psychosocial needs of each patient. We also respect the spiritual, personal values, beliefs and preferences of each patient. Columbus Regional Hospital provides considerate and respectful care. For patients under the age of eighteen, these rights and responsibilities apply to the patient and their parents and/or guardian.

Patient Rights

You have the right to receive information about your rights and responsibilities while receiving care, treatment and services. You have the right to request to receive information about the relationship between the use of services and financial incentives.

Care, Treatment, and Services

You and/or your chosen representative have the right to be involved in decisions about ongoing care, treatment, services or discharge. You have the right to participate in the development and implementation of the plan of care. This is based on the care, treatment and services that are required. The treatment, care and services will be provided within the hospital's capability and mission. These services will also be in compliance with laws and regulations.

You and/or your chosen representative have the right to be informed of your health status. This includes the right of being informed of your diagnosis and prognosis. You have the right to know the reasons for transfer either within or outside the hospital.

As allowed by law, you have the right to have your family or representative involved in care, treatment and service decisions. As allowed by law, you have the right to a legally responsible representative to make decisions for your care, treatment and service if you are unable to make those decisions.

You have the right to know the name and professional status of the doctor or other practitioner primarily responsible for your care, treatment, and services in a timely basis. You have the right to know reasons of any proposed change in the professional staff responsible for your care.

You have the right to have a family member or representative of your choice notified promptly of your admission to the hospital. You have the right to have your own physician notified of your admission to the hospital. Please advise a hospital staff member of the individual(s) you would like contacted and how to reach him or her.

You have a right to have the right to refuse care, treatment and services as allowed by law. This includes the decision to forgo or withhold life-sustaining treatment or to withhold resuscitative treatment. Whether or not you have an advance directive does not determine your access to services. When you are not legally responsible, as allowed by law, your representative has the right to refuse care, treatment, and services on your behalf.

You have the right to be free from restraints of any form that are not medically necessary or are used as a means of coercion, discipline, convenience or retaliation by staff.
You have the right to know the relationship(s) of the hospital to other persons or organizations participating in the provision of your care.

You have the right to access the cost of services rendered within a reasonable period of time, itemized when possible. You have the right to be informed of the source of the hospital's reimbursement for your services and of any limitations, which may be placed upon your care.

**Advance Directives**

You have the right to refuse care, treatment and services as allowed by law. This includes the decision to forgo or withhold life-sustaining treatment or to withhold resuscitative treatment. Whether or not you have an advance directive does not determine your access to services. When you are not legally responsible, as allowed by law, your representative has the right to refuse care, treatment, and services on your behalf.

You have the right to know if the hospital will honor the advance directive supplied by you within the limits of the law and the hospital's capabilities. Advance directives will be honored for inpatient, observation, and Cancer Center patients. For all other patients, if you present with your advance directive, the staff will ask you if it is your wish for it to be in effect for the services being rendered. If it is your desire to have it honored, then a conversation must occur with your doctor to determine if your advance directive can be honored.

You have the right to review and revise your advance directive. If you request, you have the right to have help forming an advance directive.

Columbus Regional Hospital participates in the Indiana Organ Procurement Organization. You may ask your nurse for this number. You have the right to have your wishes honored with regard to organ donation within the limits of the law or the hospital's capacity.

**Spiritual Care**

You have the right to have your cultural, gender, psychosocial, and spiritual preferences respected. You also have the right to have your personal dignity, values, beliefs and preferences respected. You have the right to pastoral and other spiritual services.

**Management of Pain**

You have the right to have your pain assessed and managed. You have the right to expect that all health care givers have received education to insure appropriate assessment and management of pain. You and your family have the right to receive education about your role in managing pain. This includes potential limitations and side effects of pain management.

**Informed Consent**

You and/or your chosen representative have the right to receive information about the proposed care, treatment, services, medications, interventions, or procedures. This information is to help you make an informed consent to treatment decision prior to any treatment or procedure being started. You have the right to be informed of potential benefits, risks, or side effects. This includes potential problems related to recuperation, and the chances of achieving care, treatment, and service goals. You also have the right to know any reasonable alternatives to the course of the proposed treatment. You have the right to be informed of risks, benefits, and side effects related to alternatives. You have the right to be informed of possible results of not receiving care, treatment, and services. This information is given to you so that you can be involved in the current and future decisions about your care. You have the right to be involved in decisions and in solving concerns about your care. You have the right to access and request amendment to your own health information as allowed by law. You have the right to receive an accounting of disclosures about your own health information as allowed by law. You and your family have the right of informed consent of donation of organs and tissues.
Confidentiality
You have the right to have your information kept confidential. You have the right to know of any limitations on the confidentiality of information learned from you or about you. You have the right to access information contained in your clinical record within a reasonable period of time based upon the hospital’s record keeping system.

You have the right to consent to recording or filming made for reasons other than for identification, diagnosis, or treatment. You have the right to request that recording or filming be stopped. You have the right to rescind consent for use up until a reasonable time before the recording or film is used.

Communication / Education
You have the right to receive written information that is appropriate to your age, understanding, and your chosen language. Appropriate provisions will be made for you if you have vision, speech, hearing, language or cognitive impairments.

You have the right to effective communication including the provision of interpretation (including translation services) as needed.

Complaint Resolution Process
You and your family have the right to be informed about the complaint resolution process. You and your family have the right to voice complaints about your care. You have the right to have complaints reviewed, and when possible, resolved. You and your family can freely voice complaints and suggest changes. You can do this without being subject to coercion, discrimination, reprisal, or unreasonable interruption of care, treatment or services. You and your family have the right to file a complaint with the state authority.

Privacy
You have the right to have your privacy respected. You have the right to an environment of care that preserves your human dignity and supports a positive self-image.

You have the right to expect telephone and mail service as appropriate to the setting. You have the right to expect a space for private telephone conversations that are appropriate to your needs and the care, treatment, and services provided.

You have the right to your personal safety and security and also the safety and security of your property. You have the right to sufficient storage space to meet your personal needs. You may keep and use personal clothing and other items unless this infringes on others’ rights or is medically or therapeutically contraindicated.

Abuse / Exploitation
You have the right to be free from real or perceived mental, physical, sexual, and verbal abuse, neglect, or exploitation from anyone. This includes staff, students, volunteers, other patients, visitors, or family members.

You have the right to have all allegations, observations or suspected case of abuse, neglect or exploitation investigated. You have the right to access protective services/intervention (that is, guardianship and advocacy services, conservatorship, and child or adult protective services).

You or your chosen representative, have the right to be given information (names, addresses, telephone numbers) of state client advocacy groups when requested.

Research Protocols
You have the right to know of any experimental, research or educational activities involved in your care or treatment. You have the right to refuse to be involved in any such activities. You have the right to consent or refuse to be involved in research protocols.

You have the right to expect that the hospital will review all research protocols in relation to its mission, values and other guidelines.
Patient Responsibilities

Providing Information
You and/or your chosen representative are responsible for providing, to the best of your knowledge, accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other matters relating to your health.
You and/or your chosen representative are responsible for reporting perceived risks in your care and unexpected changes in your health.
You and/or your chosen representative are responsible for helping the hospital to understand your environment by providing information about service needs and expectations.

Asking Questions
You and/or your family, are expected to ask questions when you do not understand your care, treatment, or services.
You and/or your family are expected to ask questions when you do not understand what you are expected to do.

Following Instructions
You and/or your family are expected to follow the care, treatment, and service plan.
You and/or your family should express any concerns about your ability to follow the proposed care plan or the course of treatment. The hospital makes every effort to change the plan of care to meet your specific needs and limitations. When such changes to the care, treatment, and service plan are not recommended, you and/or your family will be informed of the consequences of the alternatives. You will also be informed of the potential consequences of not following the proposed course.

Accepting Consequences
You and/or your family are responsible for the outcomes if you do not follow the care, treatment and service plan.

Following Rules and Regulations
You and/or your family are expected to follow the hospital’s rules and regulations.

Showing Respect and Consideration
You and/or your family are expected to be considerate of the organization’s staff and property, as well as other patients and their property.
You and/or your family are expected to help control noise and disturbances and follow the hospital’s smoking policy.

Meeting Financial Commitments
You and/or your family are responsible for providing insurance information or personal information that would assist in obtaining financial assistance in promptly meeting any financial obligation agreed to with the hospital.