

Patient Rights



"Patient" is used with the understanding that a designated representative may be acting on behalf of the patient.

ACCESS TO CARE

The right to impartial access to all available services and medically indicated treatments, regardless of race, creed, sexual orientation, gender identity or expression, national origin, handicapping condition, sources of payment, or lack of ability to pay.

RESPECT AND DIGNITY

The right to considerate, respectful care with recognition of their personal dignity, including announcing oneself when a member of the hospital staff enters a patient room and working to assure visual and auditory privacy for the patient.

PRIVACY AND CONFIDENTIALITY

The right to confidentiality of all records and communications, written or oral, between patients and health care providers; except as authorized by the patient or as may be necessary to promote continuity of care, to facilitate reimbursement on the patient's behalf, or to comply with the law. Additionally, if family/ significant other(s) / designated representative are to be included in the discussions of the patient's condition and care needs, the patient should be asked to designate who he/she wishes present or informed. Patients also have the right to personal privacy.

PERSONAL SAFETY

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

IDENTITY

The right to know the identity, credentials, licensure of all personnel involved in his or her care.

INFORMATION

The right to be informed of his or her health status, to be involved in the care planning and treatment (this includes pain management), and to be able to request and refuse treatment.

The right to obtain from their physicians, in terms they can be reasonably expected to understand, complete current information concerning their diagnosis, treatment and prognosis. When it is not deemed medically prudent to give such information to the patient, the information will be made available to the appropriate person acting for the patient.

The right to access, upon request, all information contained in their medical record; except when such access is specifically restricted for medical reasons by the attending physician.

COMMUNICATION

The right to receive information in a manner he/she understands with access, when and if reasonably possible, to a language interpreter, to TDD, or to a certified sign language interpreter in order to facilitate communication.

CONSENT

The right to receive from their physicians sufficient information for them to give informed consent prior to the start of any procedure and/or treatment, except for circumstance constituting life-threatening emergencies.

The right to refuse to participate in research projects affecting their care or treatment.

CONSULTATION

The right, at their request and expense, to assistance in obtaining consultation with other physicians.

REFUSAL OF TREATMENT

The right, to the extent permitted by the Patient Self-Determination Act and other laws, to refuse treatment and to be informed of the potential or possible consequences of this action.

ETHICAL ISSUES/CARE OF THE DYING

The right to be involved and actively participate in decisions that affect the extent and type of the care they will receive, including the right to participate in questions of pain management and other decisions affecting care of the dying patient.

TRANSFER

The right to expect, within its capabilities, that NRH will make reasonable response to requests for services. When medically appropriate, a patient may be transferred to another facility only after he/she (or an appropriate person on his/her behalf) has received reasonable information concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer.

CONTINUITY OF CARE

The right to be notified in advance of their impending discharge, to obtain at their own expense a second medical opinion on the appropriateness of discharge and, upon request, to have a person of the patient's choice notified reasonably in advance of the discharge.

Upon discharge, patients will be informed by their physicians of their continuing health care requirements and the resources available for meeting those requirements.

HOSPITAL CHARGES

The right to examine and receive an explanation or clarification of their bill, regardless of the source of payment.

COMPLAINTS AND CONCERNS

The right to express concerns regarding the quality of care being given, in a non-threatening and constructive atmosphere without fear of compromised care now or in the future. Information on the hospital's mechanism for ensuring this right will be presented to the patient or his/her representative during the admission process.

CULTURAL AND SPIRITUAL BELIEFS

The right to exercise any cultural and spiritual beliefs that are not violations of the law. The care of a patient shall include the psychosocial, spiritual and cultural values that influence the perceptions of illness.

FORMULATE ADVANCED DIRECTIVES

The right under State law to formulate advanced directives. Information regarding advanced directives will be given at the time of admission or registration.

FREE FROM VERBAL OR PHYSICAL ABUSE OR HARASSMENT

The right to be free from abuse. While the patient is under the hospital's care and on its property, the hospital is responsible for ensuring the patient's health and safety and his or her physical, emotional, and psychological well being.

FREE FROM SECLUSION AND RESTRAINT

The right to be free from seclusion, physical restraints, and drugs that are used as a restraint that are not medically necessary or are used as a means of coercion, discipline, convenience, or retaliation by staff.

NOTIFICATION OF ADMISSION

The right to have a family member or representative of his/her choice and his/her personal physician notified promptly of admission to the hospital.

PAIN MANAGEMENT

The right to have pain relieved or controlled.

VISITATION

The right to be informed of their visitation rights, including any clinical restrictions or limitations on visitation. The patient or support person, where appropriate, may consent or deny to receive visitors whom he or she designates, including, but not limited to, a spouse, domestic partner (including same-sex domestic partner), another family member, or a friend, and may withdraw or deny consent at any time. Visitation will not be restricted, limited, or denied based on race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.

Patient Responsibilities

1. To provide, to the best of their knowledge, accurate and complete information about present conditions, past illnesses, hospitalizations, medications and other matters relating to their health.
2. To report to the practitioner responsible for their care, any unexpected changes in their condition.
3. To report whether they clearly comprehend a contemplated course of action and what is expected of them.
4. To inform their physicians of any existing advance directives and for providing a copy of any and all current such documents as near to the time of admission as possible.
5. To follow the treatment plan recommended by the practitioner primarily responsible for their care.
6. To keep appointments and, if they are unable to do so for any reason, notify the responsible practitioner (or the hospital).
7. To assure that the financial obligations of their health care are fulfilled as promptly as possible.
8. To follow hospital rules and regulations in place to support quality patient care and a safe environment.
9. To support mutual consideration and respect by maintaining civil language and conduct in interactions with staff and licensed independent practitioners.
10. To be respectful of the property of other persons and of the hospital.
11. Patients are responsible to:
 - ask their doctor or nurse what to expect regarding pain and pain management,
 - discuss pain relief options with their doctors and nurses,
 - work with their doctor and nurse to develop a pain management plan,
 - ask for pain relief when pain first begins,
 - help their doctor and nurse assess their pain,
 - tell their doctor or nurse if their pain is not relieved, and
 - tell their doctor or nurse about any worries they have about taking pain medication.

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