patient rights & responsibilities
We Believe in the Golden Rule

“Do Unto Others as You Would Have Them Do Unto You.” We expect this belief to be reflected in the care you receive.

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Your Responsibilities and Rights as a Patient

This brochure explains your responsibilities and rights as a patient at Woman’s Hospital. The nature of healthcare requires that you, your support person or representative take part in your care. The success of your treatment and your satisfaction depends, in part, on your responsibilities as a patient.

You are responsible for:

- telling your doctor and caregivers everything about your health. This includes information about illnesses you currently have or have had as well as other times you have been in the hospital.
- telling your doctor and other caregivers about any medicine you are taking. This includes medicine the doctor has prescribed and “over-the-counter” medicine you can buy off the store shelf. This also includes vitamins, herbs and any dietary or nutritional “supplement” or recreational drug.
- telling your doctor or other caregivers if you have any pain or discomfort. You are responsible for following the instructions the doctor or caregiver gives you to reduce or stop this pain.
- asking your doctor or caregiver to explain if you do not understand something.
- telling your doctor and other caregivers if you think you will have problems following your treatments or if you have any concerns about your ability to follow the proposed plan of care. This means every effort will be made to adapt a plan to your specific needs. If adaptations are not recommended, you are responsible for understanding the consequences and accepting the outcomes if you do not follow the care, service or treatment plan.
- providing the name of a caregiver, if one is desired.
- giving us a copy of your advance directive, living will or durable power of attorney, if you have one (each time you are admitted to the hospital). An Advance Directive is a legal document that explains what kind of medical care you want to receive if you become ill or injured and are mentally or physically unable to make your own decisions. In the outpatient setting (excluding day surgery), an advance directive is not acknowledged.
- providing insurance information or information on how you will pay your bill.
- understanding our policies and following our rules and regulations. Maintaining civil language, conduct and showing respect for others as well as being considerate of the hospital’s personnel and property. This means you may have to make reasonable adjustments to the needs of the hospital, other patients, medical staff and hospital employees.
If you do not speak English or have limited ability to speak or understand English, you have the right to:
• have someone explain your treatment and the hospital’s policies in a language you can understand.
• have a translator, in person, on the phone, or video so that you can communicate with your caregivers about your care and use of hospital services to make “informed decisions.” To make an “informed decisions” you must understand everything about the choices you are making. You need to ask questions if you do not understand.

If you have a disability, you have the right to:
• be given assistance that meets the Americans with Disabilities Act. This means if you are visually, hearing or speech impaired, you have the right to a translator and/or assistance in understanding your treatment, participating in your care decisions, and understanding the hospital’s policies. If you are physically challenged, you have the right to assistance to help you access hospital services.

Making Decisions About Your Care
You have the right to:
• make decisions about your treatment, care and services before they start and while they are underway, including how pain will be managed.
• refuse a recommended medicine or treatment to the extent permitted by law and hospital policy. You have the right to be told how your decision may affect you medically.
• informed consent, obtained by your attending physician, for any treatment or invasive procedure. In order to make an informed decision regarding your care, information will be provided related to the specific procedure(s) and/or treatment(s); the risks involved; the possible length of recovery; and medically reasonable alternatives, including the risks and benefits associated with them.
• not be restrained with either physical restraints or with medications unless it is necessary to your treatment or to prevent you from harming yourself or others.

Information About Your Condition
You have the right to:
• obtain information on your condition, treatment and outlook. This information must be appropriate, up-to-date and understandable.
• know the risks involved, the possible length of time it will take you to heal, and the medical alternatives and associated risks and benefits that doctors can consider.
• be informed about the possible results of the care you receive. This includes results that are not common but have occurred in other people who have received the same care.
• be informed about the outcomes of care, including unanticipated outcomes.
• receive information about the patient/family initiated rapid response team.
• access protective and advocacy service.

In an emergency, when you are in a life-threatening situation if not treated immediately, there may not be time to give you all of the above information.

You have the right to:
• know the names of doctors, nurses and others who will care for you.
• know when caregivers are students, medical residents or others in training.
• know of any policy that might affect your decision to be treated at Woman’s.
Confidentiality and Safety
You have the right to:
• be treated at Woman’s with consideration, dignity, privacy and respect according to your cultural, psychosocial, spiritual, religious and personal values and beliefs, as long as these do not interfere with treatment and do not harm others.
• be treated in a setting that protects your safety, security and personal privacy and contributes to a positive self-image.
• receive care in a safe setting, a place where no one will disturb or hurt you. This means both real and perceived mental, physical, sexual, and/or verbal abuse; neglect; harassment; and/or exploitation.
• ask that your name and/or the name of your doctor not be posted outside of your hospital room.
• ask that your presence in the hospital be kept confidential from telephone calls and/or visitors.
• be examined and treated in a way that your security and privacy will be protected. This includes having privacy when you discuss your treatment so no one can overhear. It also means providing complete privacy when you have your treatment. All communication and records involving your care will be kept confidential except in cases of suspected abuse and public health hazards; in these cases, the hospital is required or permitted by law to report such to authorities. When reporting, the hospital will still emphasize the private nature of this information.
• see your medical records within a reasonable time frame from when you first asked to do so; request amendment; receive an accounting of disclosures; and have the information in your records explained to you, except when restricted by law.
• request pastoral care and other spiritual services.

Pain Management
You have the right to:
• be educated about your pain and choices for treating your pain.
• receive appropriate and timely assessment, reassessment and pain management.
• have your reports of pain believed, respected and acted upon by healthcare professionals.

Visitation
You have the right to:
• have a support person included in or excluded from participating in your care.
• enjoy full and equal visitation privileges consistent with your preferences and wishes which are subject to justified clinical restrictions (defined as any clinically necessary or reasonable restriction or limitation imposed by the hospital on your visitation rights that would be necessary to provide safe care to you or other patients). Children (under 14 years of age) visiting must be supervised by an adult other than the patient at all times. Children are not allowed to stay overnight.
• designate a support person—as defined by you—including but not limited to a family member, a spouse, a domestic partner (including same-sex domestic partner), a friend, a caregiver, a significant other, a loved one or other individual to provide you with comfort, support and visitation during the course of your hospital stay and the right to withdraw or deny such consent at any time.
• receive visitation from designated support persons not restricted, limited, or otherwise denied on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation or disability.

Visitation may be restricted and/or not permitted due to health and safety issues of the community.
Becoming a Patient

The hospital must:
• evaluate and serve you or refer you to another facility according to the type and urgency of your case.
• make clinical decisions, including ordering of tests, treatments and other interventions based upon your identified healthcare needs.
• promptly notify an identified support person of your choice and your own physician that you have been admitted to the hospital.
• transfer you upon your request to be transferred to another facility when it is a sound medical and legal decision. (The facility to which you are to be transferred must first accept you as a patient).

If you are transferred, you must be told:
• why you are being transferred.
• the risks and benefits of being transferred.
• other options for treatment.

If you refuse a recommended treatment, you may still receive care and services that the hospital provides.

The hospital prohibits discrimination based upon age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation and/or gender identity or expression.

Handling Disagreements

You have the right to:
• be told about hospital policies and procedures about patient care, treatment(s), visitation and responsibilities.
• voice complaints and recommend changes freely without being subject to coercion, discrimination, reprisal or unreasonable interruption of care.
• know how disagreements and complaints about your care are handled. This may be through ethics committees, patient representatives or other resources available at the hospital. The hospital's employees will work to address and resolve the issues that concern you.
• file a “grievance” if you have complaints about any treatment or service you have received, including premature discharge or any patient safety concerns. You may file a grievance by calling our Patient Relations Department at ext. 5555 within the hospital or 225-231-5555 if you are calling from outside the hospital. Additional information will be provided regarding the hospital’s grievance process and time frames.

If you wish to file a complaint, you have the right to go directly to the state agency that handles these issues. You have the right to be given the name, address and telephone number of this state agency.

You may report your complaint to:
Hospital Complaint Desk
Department of Health and Hospitals
Health Standards Section
P. O. Box 3767
Baton Rouge, LA 70821
Telephone: 225-342-0138
Toll-free number: 1-866-280-7737

In addition to the above, Medicare beneficiaries have the right to seek review by the Centers for Medicare and Medicaid Services Quality Improvement Organization for quality of care issues, coverage decisions and premature discharge appeals.

You may report your complaint to:
KEPRO
5201 West Kennedy Blvd.
Suite 900
Tampa, FL 33609
Telephone: 813-280-8256
TTY: 855-843-4776
Toll-free number: (888) 315-0636

Patient Safety concerns can be reported to The Joint Commission:
• Refer to The Joint Commission website: www.jointcommission.org
• or contact a Joint Commission representative at their complaint telephone number at (800) 994-6610.
Research Studies
You have the right to:
• choose whether to be a part of a research study that affects treatment or requires your involvement as a patient.
• receive detailed information about the study from the hospital so that you can make an informed decision to participate. The information given will include purpose of the research, expected benefits, possible discomforts or risks, duration, treatment alternatives and procedures to be followed.
• receive information of any compensation for participating, including whether medical treatment will be available if injury occurs.
• receive information of whom to contact for questions.
• receive information of whom to contact concerning rights or to report any injuries that may have occurred.
• receive disclosure of any costs.
• receive a copy of the informed consent.
• receive the most effective care the hospital can offer even if you decide not to participate in or if you decide to leave a research study.

Financial Information
You have the right to ask about:
• business relationships among the hospital, educational institutions and other healthcare providers or payers that may affect your treatment and care.
• the hospital’s cost for services and the possible ways to pay your bills.
• immediate and long-term financial effects of treatment choices, as long as we know this information.

For More Information
If you have additional questions or concerns about your rights, please call:
• your doctor.
• the nursing supervisor on duty.
  Dial 0 for an operator from inside the hospital.
  Dial 225-927-1300 from outside the hospital.
• our patient representative.
  Dial ext. 5555 from inside the hospital.
  Dial 225-231-5555 from outside the hospital.
  If you have questions about your bill, please call Patient Accounting.
  • dial ext. 8106 from inside the hospital.
  • dial 225-924-8106 from outside the hospital.

Louisiana Family Caregiver Act
You have the opportunity to name a caregiver. If you name a caregiver, the hospital will make a reasonable effort to educate and instruct the caregiver regarding any care needs after you are discharged from the hospital. The hospital will also make a good faith effort to notify the caregiver that you are being discharged from the hospital before your discharge. However, if the hospital is unable to contact your caregiver, you may still be discharged.

This law does not allow the caregiver to make any medical decisions or provide consent for you unless they are otherwise qualified.

If you name a caregiver, tear this page out of the booklet and give it to your nurse.

I choose to name__________________________________________________________
as my caregiver.

The caregiver address is ____________________________________________________

and phone number is _____________________________________________________

Printed Name ____________________________________________________________

Signature ______________________ Date/Time ____________________________
100 Woman’s Way
Baton Rouge, LA 70817
225-927-1300
womans.org

Founded in 1968, Woman’s is a nonprofit organization, governed by a board of community volunteers, providing medical care and services in order to improve the health of women and infants, including community education, research and outreach.