

Your Health. Your Rights.

While you are a patient of Holy Cross Hospital, or a family member or guardian of a patient, we want you to know the rights you have under federal and state laws. We honor your rights as a patient. By taking an active role in your own health care, you can help your caregivers meet your needs.

Please ask questions and share important information. You have the right to share in decision making and in the implementation of your care plan.

Hospital Rules and Regulations

You are entitled to information about the Hospital's process for giving feedback and handling complaints. If you need assistance, contact us immediately. We want to hear what you have to say, and we are happy to work with you.

Informed Consent

Except for emergencies, physicians must obtain your permission prior to the start of any procedure or treatment, or both. Informed consent is defined in section 103 of the Health Care Services Malpractice Act (40 P. S. § 1301.103). If you have questions, please ask us for help.

Privacy, Safety, and Care Provision

You have the right to privacy concerning your medical care program. You have the right to safe, high-quality care. Your health care decisions, consultation, examination, and treatment are considered confidential and will always be conducted discreetly.

You have the right to:

1. Completely confidential patient/medical records.
2. Receive excellent, timely care in a safe setting.
3. Participate in the development and implementation of your health care plan.
4. Request or refuse treatment; and be informed of the medical consequences of any refusal of drugs, treatment, or procedure.
5. Be given the name of your attending physician, the names of all other physicians directly participating in your care, and the names and functions of other health care persons having direct contact with you.
6. Appropriate assessment and management of pain.
7. Expect emergency procedures to be implemented without unnecessary delay.
8. Be informed of unanticipated outcomes during your care.
9. Be free from all forms of abuse or harassment.
10. Be free of physical and/or chemical restraints. Restraints will be used only when necessary and not used as a coercion, discipline, convenience, or retaliation.
11. Have your cultural, psychosocial, spiritual, and personal values, beliefs and preferences respected, and receive medical and nursing services without discrimination based upon race, color, religion, sex, sexual preference, national origin, or source of payment.
12. Access protective and advocacy services.
13. Limit who knows you are in the hospital.
14. Obtain consultation with another physician.



Communication

You have the right to:

1. Receive full information concerning your diagnosis, treatment, and prognosis, including information about alternative treatments and possible complications. If we cannot give information directly to you, the information will be given on your behalf to your next of kin or other designated person.
2. Receive information in a way that you clearly understand. We can provide an interpreter; provide assistance if you have vision, speech, hearing or cognitive impairments; or provide any other communications support you deem necessary.
3. Have a family member (or appointed representative) and your physician promptly notified upon your admission to the Hospital.
4. Access people outside the hospital through verbal or written communication.
5. Designate a support person, if needed, to act on your behalf to assert and protect your patient rights.
6. Prepare an Advance Directive, and have caregivers provide care consistent with them.
7. Access and receive your own protected health information as permitted by law.
8. Access your medical record information within a reasonable time after discharge, unless access to the medical record is restricted by the doctor for medical reasons or is prohibited by law. Patient records will only be used or disclosed as referenced in our Notice of Privacy Practices.

Refusing Care

You have the right to refuse care at any time. You also have the right to be informed of the medical consequences of any refusal of drugs, treatments, or procedures.

Notice of Patient Rights and Grievance

Holy Cross Hospital will inform you or your designee of your rights in advance of giving or discontinuing care. Grievances may be filed with the Director of Risk Management. If you have concerns about your care, please contact us immediately. Any concern you have will not adversely affect your current or future health care. We take all feedback seriously and are always looking for ways to improve the care we provide.

If your concern cannot be remedied immediately, a written complaint can be submitted. The written complaint will be sent to the **Director of Risk Management** for review and appropriate action will be taken.

Transfer and Continuity of Care

You may not be transferred to another facility or organization unless:

- A complete explanation of the need is given to you or your family member, if possible
- Alternatives to the transfer are explained and;
- The transfer is acceptable to the other facility.

You have the right to be informed of any continuing health care requirements you will need when you leave the hospital.

Billing

You have the right to request and receive an itemized and detailed explanation of your bill for services rendered. You also have the right to request clarification of your Hospital charges. Additionally, you have a right to full information and counseling on the availability of known financial resources for this health care.