
PATIENT RIGHTS & RESPONSIBILITIES

RIGHTS

St. Clair Hospital is committed to providing you with a high level of quality health care services. No person shall be denied such care based on race, creed, color, religion, sex or sexual preference, age, disability, national origin or source of payment in accordance with the provisions of the Pennsylvania Human Relations Act.

The following Patient Bill of Rights lists your rights as a patient. It is your responsibility to read these rights and assert them, if necessary.

- You have the right to be informed of your rights as a patient in advance of the provider furnishing or discontinuing your care, whenever possible.
- You have the right to have a family member or representative of your choice and your own physician notified as promptly as possible of your admission to the hospital.
- You have the right to personal privacy.
- You have the right to be informed of your visitation rights including any clinical restriction or limitation on such rights. Visitation will not be restricted, limited, or otherwise denied based on race, color, national origin, religion, sex, sexual orientation, gender identity, or disability.
- You have the right to designate the visitors that you receive including but not limited to a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend, and you have the right to withdraw or deny such consent at any time. These privileges will not be more restrictive than the rights provided to immediate family members.
- You have the right to have a family member, friend, or other individual to be present for emotional support during the course of your stay unless the individual's presence infringes on others' rights, safety, or is medically or therapeutically contraindicated.
- You have the right to receive care in a safe setting, free from verbal or physical abuse or harassment.
- You have the right, upon request, to 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 personnel having direct contact with you.
- You have the right to make informed decisions regarding your care. You have the right to be informed of your status, to be involved in care planning and treatment and have the ability to request or refuse treatment. This right must not be construed as a mechanism to demand the provision of treatment or services deemed medically unnecessary or inappropriate.
- You have the right to formulate advanced directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives.
- You have the right to every consideration of your privacy concerning your own medical care program. Case discussion, consultations, examination and treatment are considered confidential and should be conducted discreetly.
- You have the right to have all records pertaining to your medical care treated as confidential except as otherwise provided by law or third party contractual arrangements.
- The hospital shall provide you, or your designee, upon request, access to all information contained in your medical records, within a reasonable timeframe, unless access is specifically restricted by the attending physician for medical reasons.
- You have the right to know what hospital rules and regulations apply to your conduct as a patient.
- You have the right to expect emergency procedures to be implemented without any unnecessary delay.
- You have the right to good quality care and high professional standards that are continually maintained and reviewed.
- You have the right to participate in the development and implementation of your plan of care. You have the right to full information, in laymen's terms, concerning your diagnosis, treatment and prognosis, including information about alternative treatments and possible complications. When it is not medically advisable to give such information to you, the information shall be given on your behalf to your next of kin or other appropriate person.
- You have the right to assistance in obtaining consultation with another physician at your request and at your own expense.
- Except for emergencies, the physician must obtain the necessary informed consent prior to the start of any procedure or treatment, or both.
- You, or in the event that you are unable to give informed consent, a legally responsible party, have the right to be advised when a physician is considering you as a part of a medical care research program or donor program, and you, or legally responsible party, must give informed consent prior to actual participation in such a program. You or your legally responsible party, may, at anytime, refuse to continue in any such program to which you have previously given informed consent.
- You have the right to refuse any drugs, treatment or procedure offered by the hospital to the extent permitted by law, and a physician shall inform you of the medical consequences of your refusal of any drugs, treatment or procedure.
- You have the right to be free from restraints and seclusion 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 medical and nursing services without discrimination based upon race, color, religion, sex, sexual preference, age, disability, national origin or source of payment.
- If you do not speak English or are hearing impaired, you may request an interpreter or an auxiliary device.
- You have the right to expect consideration of your psychosocial, spiritual and cultural needs.
- You have the right to appropriate assessment and management of pain.
- You have the right to expect good management techniques to be implemented within the hospital considering effective use of your time and to avoid personal discomfort to you.
- When medically permissible, you may be transferred to another facility only after next of kin or other legally responsible representative has received complete information and an explanation concerning the needs for and alternatives to such a transfer. The institution to which you are to be transferred must first have accepted you for transfer.
- You have the right to examine and receive a detailed explanation of your bill.
- You have the right to full information and counseling on the availability of known financial resources for your health care.
- You have the right to expect that the health care facility will provide a mechanism whereby you are informed upon discharge of your continuing health care requirements following discharge and the means for meeting them.
- You cannot be denied the right of access to an individual or agency who is authorized to act on your behalf to assert or protect the rights set out in this section.
- If disabled, you have the right to expect reasonable and equal access to the facilities, services and programs of the hospital.
- If you or a family member are interested in becoming an Organ Donor, additional information is available through CORE at 1-800-366-6777.

RESPONSIBILITIES

St. Clair Hospital makes every practical attempt to create a pleasant and safe environment for you during your stay. Certain hospital rules and regulations are necessary to provide this environment that shows consideration and respect for patients as well as the health care team, and it is your responsibility to adhere to these regulations. Among these are visiting hours and number of visitors, smoking regulations, and general safety guidelines. You may encounter other restrictions during your hospitalization. As a patient you also have additional responsibilities which include the following:

- To provide accurate and complete information to the best of your knowledge about your present condition as well as past illnesses, hospitalizations and medications.
- To comply with instructions and the treatment plan developed with your health care team.
- To accept responsibility for outcomes realized if treatment or instructions are refused or not followed.
- To be aware of your financial responsibilities and the requirements of your insurance carrier to protect your benefits.

St. Clair Hospital encourages you to discuss any concerns you may encounter with those directly involved in your care or you may contact the Patient Representative at ext.1835. A patient or the patient's representative can submit a written or verbal complaint or grievance by contacting the Patient Representative at 412-942-1835. Copies of this document are available upon request.

St. Clair Hospital procedure notwithstanding, you may address your concern with:

PA Department of Health
Division of Acute and Ambulatory Care
Room 532 Health and Welfare Building
625 Forster Street
Harrisburg, PA 17120-0701
Phone: 1-800-254-5164

The Joint Commission
Office of Quality Monitoring
At 1-800-994-6610 or by e-mailing
complaint@jointcommission.org

