


Patient Rights and Responsibilities

You are responsible for and have the right to:

1. Considerate and respectful care, and to be made comfortable. You have the right to respect for your cultural, psychosocial, spiritual, and personal values, beliefs and preferences. You should be considerate and respectful of other patients and hospital personnel.

2. Have effective communication for critical information in a manner you understand and that meets your communications needs (both verbal and written). This is especially important when you receive education, information from your physician about your diagnosis, prognosis, treatment or consent for treatment, discharge planning or when you are discussing complex billing or insurance matters with hospital staff. Language interpreters and sign-language interpreters are available to you at no charge. If needed, please request this service from your nurse or call the hospital operator. 

3. Have a family member (or other representative of your choosing) and your own physician notified promptly of your admission to the hospital.

4. Know the name of the licensed health care practitioner acting within the scope of his or her professional licensure, who has primary responsibility for coordinating your care, and the names and professional relationships of physicians and non-physicians who will see you. Know that all physicians are members of the medical staff and are not employees of SFMC. This includes the radiologists, emergency department physicians, pathologists, anesthesiologists, and the like. All physicians bill separately for their services.

5. Receive information about your health status, diagnosis, prognosis, course of treatment, prospects for recovery and outcomes of care (including unanticipated out-comes) in terms you can understand. You have the right to effective communication and to participate in the development and implementation of your plan of care. You have the right to participate in ethical questions that arise in the course of your care, including issues of conflict resolution, withholding resuscitative services, and forgoing or withdrawing life-sustaining treatment.

6. Make decisions regarding medical care, and receive as much information about any proposed treatment or procedure as you may need in order to give informed consent or to refuse a course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved, alternate courses of treatment or non-treatment and the risks involved in each, and the name of the person who will carry out the procedure or treatment. Please ask questions if you do not understand your diagnosis or treatment plan.

7. Request or refuse treatment, to the extent permitted by law. However, you do not have the right to demand inappropriate or medically unnecessary treatment or services. You have the right to leave the hospital even against the advice of members of the medical staff, to the extent permitted by law. You have the responsibility to accept the outcome and consequences of your decision to not follow the recommended treatment. You should express any concerns about your ability to follow the recommended treatment to your physician.

8. Be advised if the hospital/licensed health care practitioner acting within the scope of his or her professional licensure proposes to engage in or perform human experimentation affecting your care or treatment. You have the right to refuse to participate in such research projects.

9. Reasonable responses to any reasonable requests made for service.

10. Appropriate assessment and management of your pain, information about pain, pain relief measures and to participate in pain management decisions. You may request or reject the use of any or all modalities to relieve pain, including opiate medication, if you suffer from severe chronic intractable pain. The doctor may refuse to prescribe the opiate medication, but if so, must inform you that there are physicians who specialize in the treatment of pain with methods that include the use of opiates.

11. Formulate advance directives. This includes designating a decision maker if you become incapable of understanding a proposed treatment or become unable to communicate your wishes regarding care. Hospital staff and practitioners who provide care in the hospital shall comply with these directives. All patients' rights apply to the person who has legal responsibility to make decisions regarding medical care on your behalf. If you would like information about advance health care directives, contact Social Services at 310-900-2094.

12. Have personal privacy respected. Case discussion, consultation, examination and treatment are confidential and should be conducted discreetly. You have the right to be told the reason for the presence of any individual. You have the right to have visitors leave prior to an examination and when treatment issues are being discussed. Privacy curtains will be used in semi-private rooms.

13. Confidential treatment of all communications and records pertaining to your care and stay in the hospital. You will receive a separate "Notice of Privacy Practices" that explains your privacy rights in detail and how we may use and disclose your protected health information.

14. Receive care in a safe setting, free from mental, physical, sexual or verbal abuse and neglect, exploitation or harassment. You have the right to access protective and advocacy services including notifying government agencies of neglect or abuse. Refer to #23, #24, and #25 below for instructions.

15. Be free from restraints and sedation of any form used as a means of coercion, discipline, convenience or retaliation by staff.

16. Reasonable continuity of care and to know in advance the time and location of appointments as well as the identity of the persons providing the care.

17. Be informed by the physician, or a delegate of the physician, of continuing health care requirements and options following discharge from the hospital. You have the right to be involved in the development and implementation of your discharge plan. Upon your request, a friend or family member may be provided this information also. You have the right to file a grievance if you feel you are being discharged too early.

18. Know which hospital rules and policies apply to your conduct while a patient. You should follow the hospital's rules and regulations concerning patient conduct. Smoking is only permitted outside in designated areas, requires your physician's approval and health facility or staff escort. You should respect the property of other persons and of the hospital.

19. Designate a support person as well as visitors of your choosing, if you have decision-making capacity, whether or not the visitor is related by blood, marriage, or registered domestic partner status, unless:

- No visitors are allowed.
- The facility reasonably determines that the presence of a particular visitor would endanger the health or safety of a patient, a member of the health facility staff, or other visitor to the health facility, or would significantly disrupt the operations of the facility.
- You have told the health facility staff that you no longer want a particular person to visit.

However, a health facility may establish reasonable restrictions upon visitation, including restrictions upon the hours of visitation and number of visitors. The health facility must inform you (or your support person, where appropriate) of your visitation rights, including any clinical restrictions or limitations. The health facility is not permitted to restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.

20. Have your wishes considered, if you lack decision-making capacity, for the purposes of determining who may visit. The method of that consideration will comply with federal law and be disclosed in the hospital policy on visitation. At a minimum, the hospital shall include any persons living in your household and any support person pursuant to federal law.

21. Examine and receive an explanation of the hospital's bill regardless of the source of payment.

22. Be free of discrimination on the basis of race, color, religion, ancestry, national origin, disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, sexual orientation,

citizenship, primary language, or immigration status as set forth in Section 51 of the Civil Code.

23. File a grievance. If you want to file a grievance with this hospital, you may do so by writing or by calling the Risk Management Department at (310) 900-8656 or mailing your complaint to the attention of Risk Management. You may also visit the Risk Management Department which is located on the 2nd floor of the Patient Tower.

The Risk Management Department will review each grievance and provide you with a written response within 7 days. The written response will contain the name of a person to contact at the hospital and the steps taken to investigate the grievance. If the grievance will not be resolved, or if the investigation is not or will not be completed within 7 days, the hospital will inform the patient or the patient's representative that the hospital is still working to resolve the grievance and that the hospital will follow-up with a written response. The hospital will attempt to resolve all grievances as soon as possible with the results of the grievance process, and the date of completion of the grievance process. Concerns regarding quality of care or premature discharge will also be referred to the appropriate Utilization and Quality Control Peer Review Committee.

24. File a complaint with the following, regardless of whether you use the hospital's grievance process.

- California Department of Public Health 3400 Aerojet Avenue, Ste. 323, El Monte, CA 91731, (626) 569-3724
- Department of Fair Employment and Housing 320 W. 4th St., #10, Los Angeles, CA 90013, (213) 439-6799
- The Medical Board of California – Central Complaint Unit 2005 Evergreen Street, Ste. 1200, Sacramento, CA 95815, (800) 633-2322, (916) 263-2382

25. If your concerns are not resolved through the hospital's process, you may contact The Joint Commission Office of Quality and Patient Safety to register your complaint by calling 1-800-994-6610, submitting your complaint by fax to 630-792-5636 or online at www.jointcommission.org/GeneralPublic/Complaint, or by emailing patientsafetyreport@jointcommission.org.

This Patient Rights listing incorporates the requirements of the Joint Commission; Title 22, California Code of Regulations, Section 70707; Health and Safety Code Sections 1262.6, 1288.4, and 124960; 42 C.F.R. Section 482.13 (Medicare Conditions of Participation) and SB464 Section 1262.6.