



Patient Bill of Rights and Responsibilities

PATIENT RIGHTS

As a patient, you are to be informed of Citizens Medical Center, Inc. (DBA: Citizens Health) policies regarding patient rights during your admission process.

You have the right to:

- Respectful care.
- Confidentiality.
- Security.
- Complete, correct, and full information about your care and healthcare providers.
- Participation in your care including treatment decisions, changes in physician or transfer to another facility.
- Have a family member and/or personal representative and your own physician promptly notified when you are admitted to the hospital.
- Assistance in obtaining consultation with another physician or practitioner at your request and own expense.
- Help in completing an advance directive. If you already have an advance directive, you have the right to expect it to be followed by the physicians and hospital staff caring for you.
- Be treated in the least restrictive way that preserves your safety and that of other patients and hospital staff.
- Expect hospital staff to be committed to pain prevention and management.
- Receive communication in a language you can understand.
- Impartial access to medical treatment or accommodations, regardless of race, color, religion, gender orientation, gender identity, sex, national origin or source of payment.
- Accept medical care, to refuse treatment to the extent permitted by state law, and to be informed of the medical consequences of refusing treatment.
- Access to the information contained in your medical records within the limits of state law.
- Examine your bill and receive an explanation of the charges, regardless of the source of payment for your care.
- Consent or refuse involvement of student healthcare professionals in your medical care.
- Express concerns or grievances regarding quality of care.
 - a. Grievances may be written or presented orally to the Patient Representative or Risk Manager. A written grievance form may be obtained from the Patient Representative, Risk Manager, or at the Nurses' Station. You also have the right to contact KEPRO with any grievances or quality of care concerns at (855) 408-8557 or KEPRO at 5201 W Kennedy Blvd, Suite 900, Tampa, FL 33609. The TTY number is 855-843-4779. Complaints may also be emailed to beneficiary.complaints@hcqis.org

PATIENT RESPONSIBILITIES

You, as a patient, are responsible for:

1. Providing correct information about your symptoms, past illnesses, hospitalizations, medications, and any other pertinent information.
2. Asking questions until you fully understand your plan of care.
3. Participating fully in decision-making about your plan of care. This includes telling your physicians and nurses about any obstacles you may encounter in continuing your plan of care after discharge.
4. Following the treatment plan recommended by your physician, including the instructions of nurses and other health professionals as they carry out the coordinated plan of care and enforce the applicable hospital rules and regulations.
5. Keeping appointments and notifying the hospital or physician when unable to do so.
6. Being fully involved in your discharge plan.
7. Choosing someone to speak for you in the event that you cannot speak for yourself.

8. Assuring the financial obligations of your healthcare are fulfilled as promptly as possible, which includes providing necessary information for insurance claims and working with the hospital to make payment arrangements.
9. Following hospital rules, such as our no-smoking policy and visitor and noise-control guidelines.
10. Being respectful of the property of others and of the hospital.
11. Showing respect to other patients, physicians and hospital staff.